

COVID Vaccine Updates

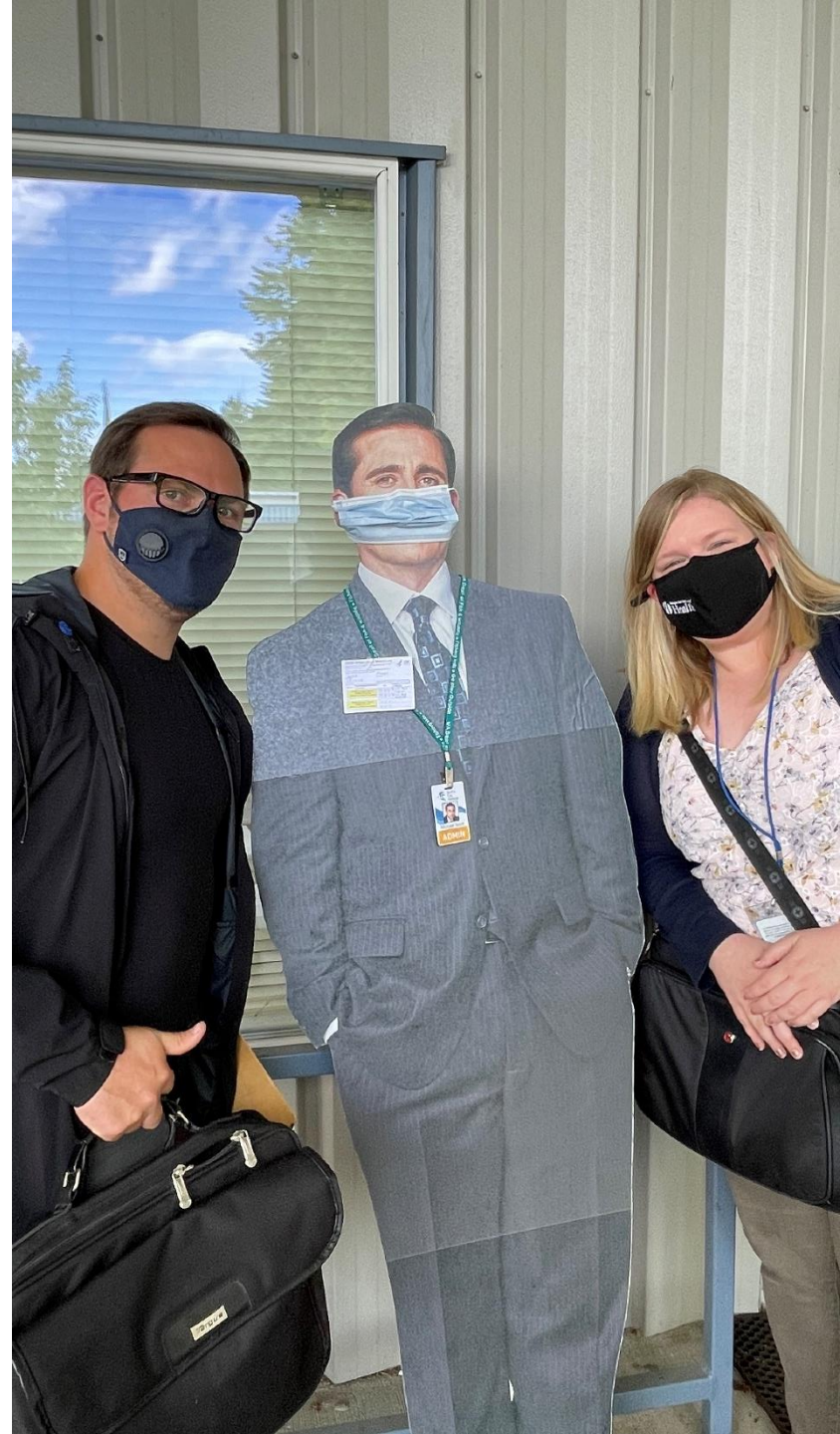


SHEANNE ALLEN









National COVID Vaccine Summary

- Currently more Americans have a full vaccine card than a valid passport...
 - 217 million people have completed the COVID-19 vaccine series
 - 145 million passports in circulation
- The number of participating COVID-19 vaccine providers outnumber all of the U.S.:
 - Walmart stores
 - Dollar General stores
 - Starbucks®
 - McDonald's

COMBINED!



National COVID Vaccine Distribution Stats

Distribution by the Numbers	 72 Weeks of Distribution	 723 Million Doses Delivered in U.S.	 ~19 Million Doses Administered for Pediatrics 5-11yo	 ~10.7% of Doses Reported Wastage
	 ~573 Million Total Doses Administered	 76% of Adults 18+ Fully Vaccinated	 100 Million Booster Doses Administered	 ~219.4 Million People Fully Vaccinated

*Celebrating 500 Days of Domestic COVID-19 Vaccination!
It's time for...*



As of April 19, **81.6%*** of the population 5 and up has **received at least one dose** and **74.2%*** is **fully vaccinated**.

*This percent includes aggregate data from the Department of Defense and Department of Veterans Affairs and is higher than the DOH data dashboard.



VACCINATIONS

Where and when are vaccinations being given?

How many people are getting vaccinated?

Who is getting vaccinated?

COVID-19 IN WASHINGTON STATE [Where and when are vaccinations being given?](#)

DATA AS OF 4/30/2022 11:59:00 PM PT

This chart shows the number of COVID-19 vaccines given in Washington state facilities and reported to the state. Not all COVID-19 vaccines given in Washington are reported to the state. Vaccine doses given reflects the data reported to the state as of the latest update date. Please note, the measures "vaccines given" and "people vaccinated" are not comparable. People vaccinated counts the number of Washington residents initiating their primary series, completing their primary series, and receiving a booster. Numbers may not always align since people may live in a different county than where they were vaccinated. Vaccination data are updated on Mondays, Wednesdays, and Fridays only. [Learn More](#)

SELECT COUNTIES

Search

- ☐ Select all
- ☐ Adams County
- ☐ Asotin County
- ☐ Benton County
- ☐ Chelan County
- ☐ Clallam County
- ☐ Clark County
- ☐ Columbia County
- ☐ Cowlitz County
- ☐ Douglas County
- ☐ Ferry County
- ☐ Franklin County
- ☐ Garfield County
- ☐ Grant County
- ☐ Grays Harbor County
- ☐ Island County

By Location

By Date

Cumulative View

Vaccine Doses Given and Reported (statewide or selected counties) **13,617,889**

Statewide Measures Only

Vaccine Doses Given and Reported in Washington **13,617,889**

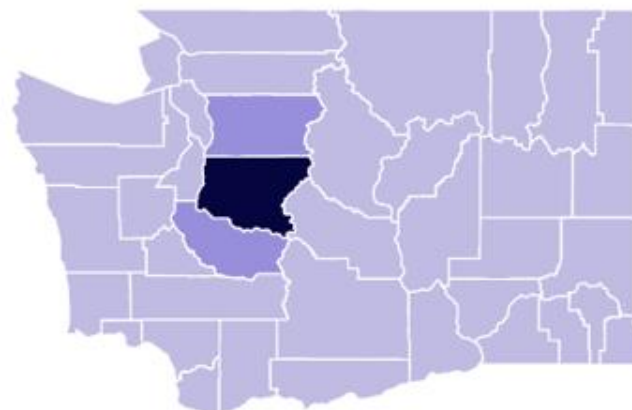
Doses Delivered to Washington Providers **8,669,560**

Doses Delivered for Federal Partnership Programs **6,740,090**

Percentage of Delivered Doses Given **88.4%**

Current Complete 7-Day Average **10,885**

VACCINE DOSES GIVEN AND REPORTED IN WASHINGTON COUNTIES



County data for doses given are based on the location of the facility giving the vaccine. 90,095 vaccine doses given do not have a county reported.

[COVID-19 Data Dashboard | Washington State Department of Health](#)

VACCINATIONS

Where and when are vaccinations being given?

How many people are getting vaccinated?

Who is getting vaccinated?

Sex

Age

Race/Ethnicity

COVID-19 IN WASHINGTON STATE Age

DATA AS OF 4/30/2022 11:59:00 PM PT

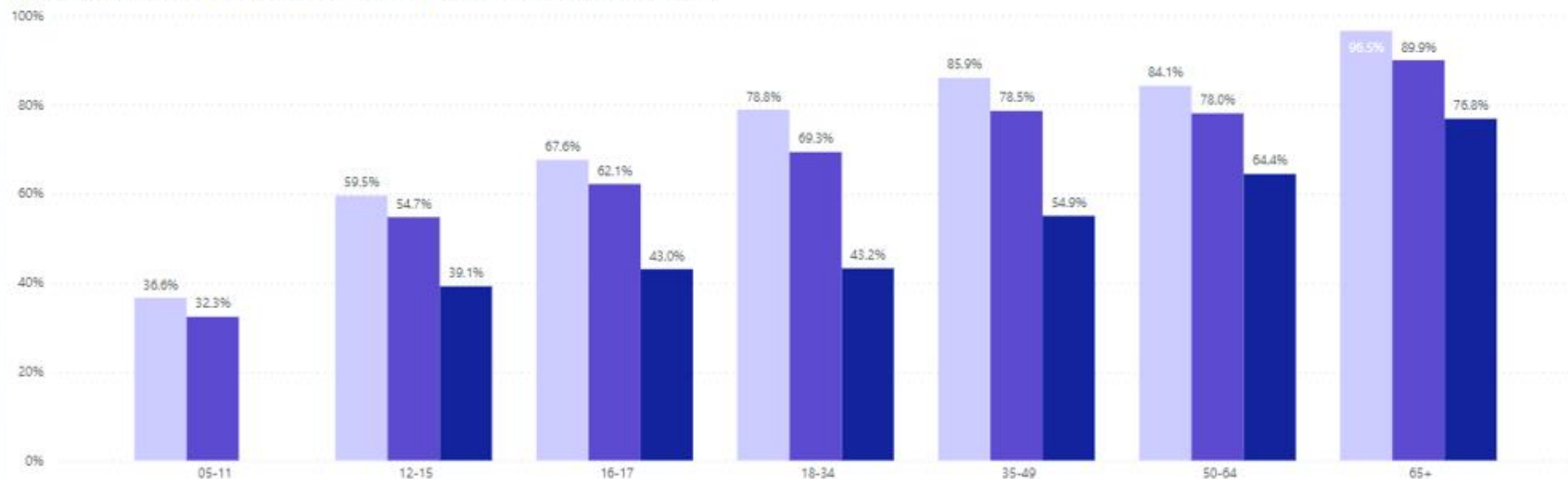
This chart shows the percentage of individuals who have been vaccinated within each age group. [Learn More](#)

State Level

County Level

PERCENT VACCINATED, WITHIN AGE GROUP

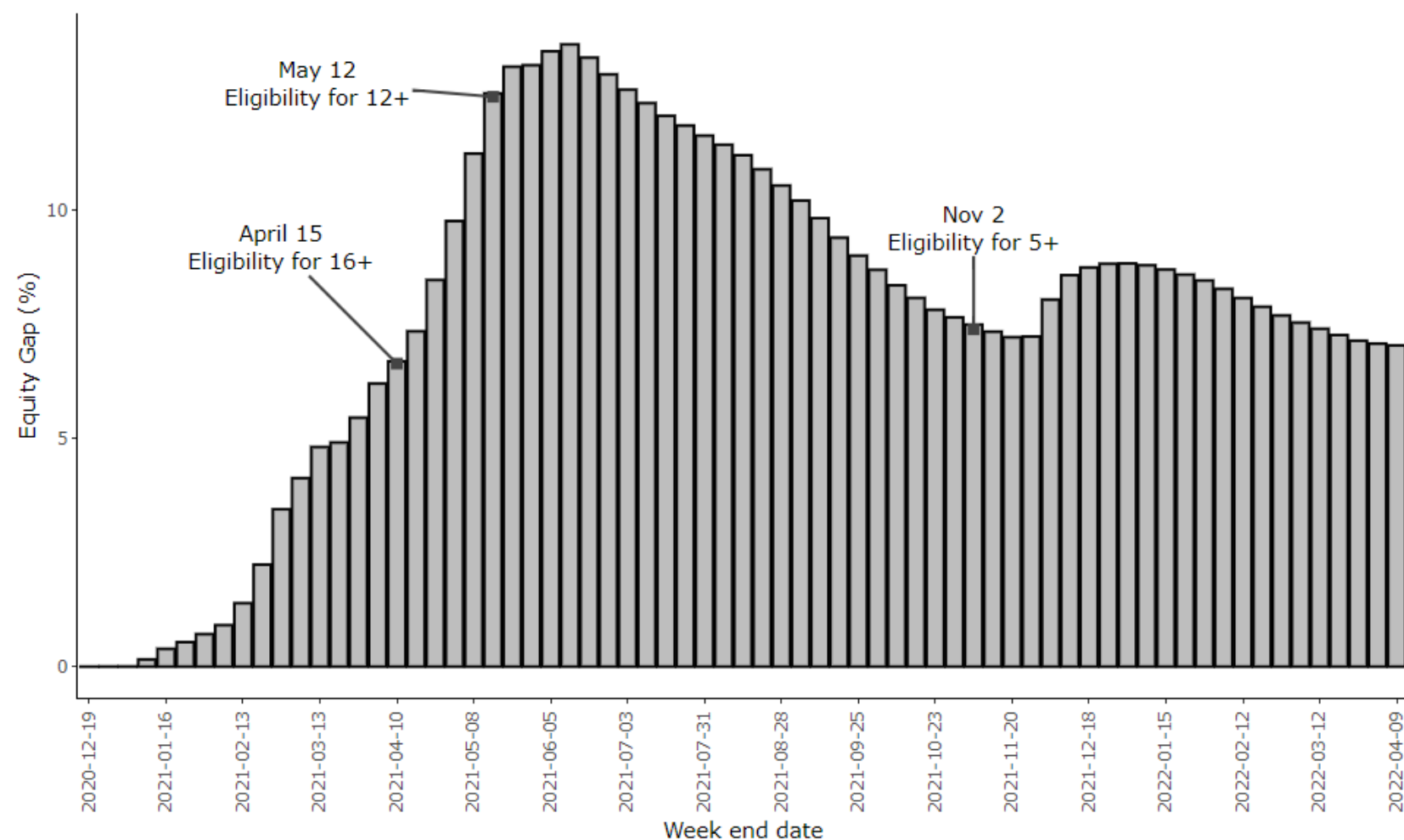
Initiated Primary Series (%) Completed Primary Series (%) Eligible People Who Received a Booster (%)



[COVID-19 Data Dashboard | Washington State Department of Health](#)

Equity Gap for Vaccine Initiation

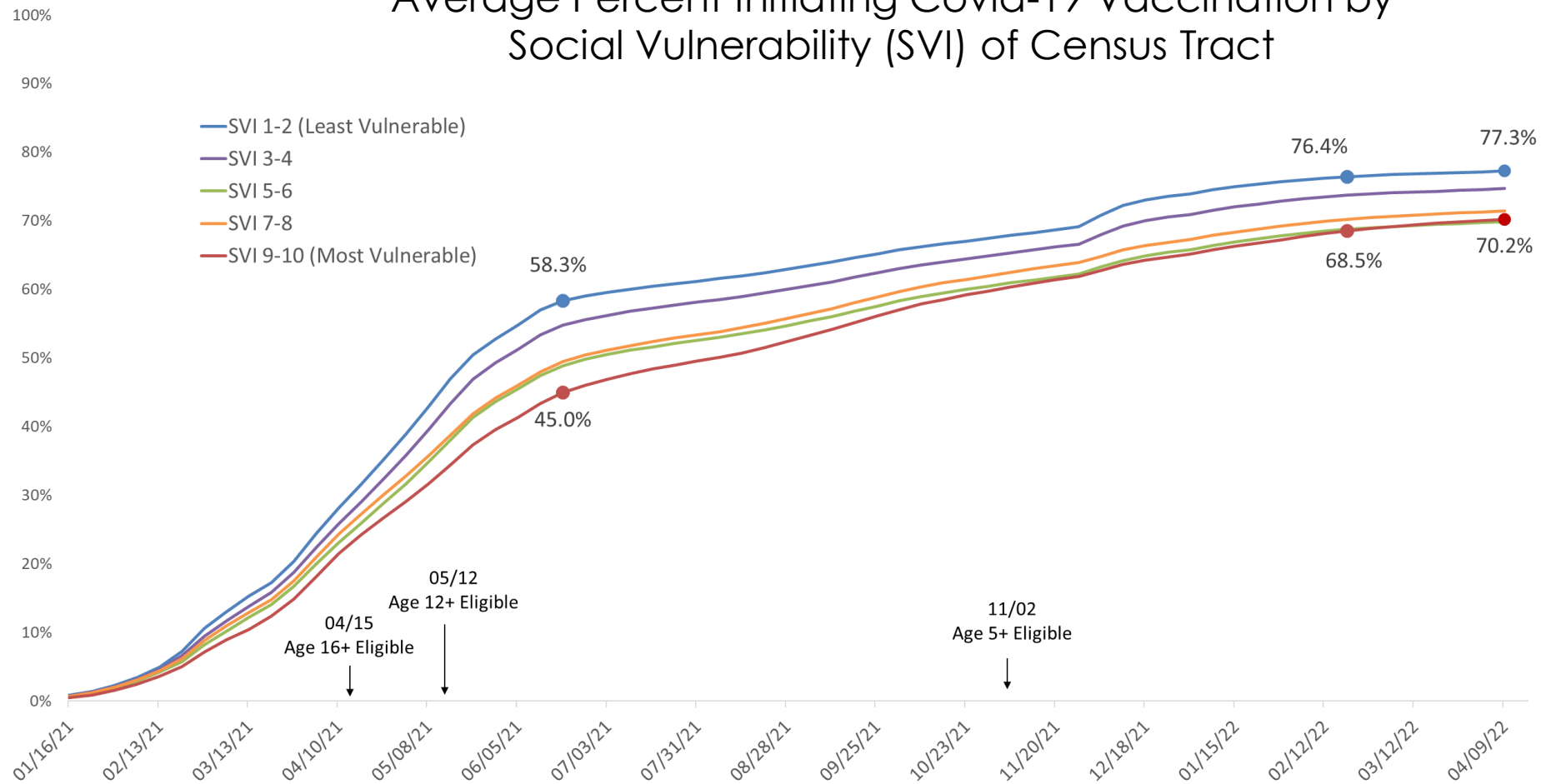
Weekly trend through 4/9/22



This graph shows the weekly difference in the average percent of the population initiating vaccination for census tracts at the high and low ends of the Social Vulnerability Index (SVI). The overall SVI ranking was used for each census tract. Census tracts with a SVI of 9 or 10 are categorized as 'high' SVI (greater social vulnerability). Those with a SVI of 1 or 2 are categorized as 'low' SVI.

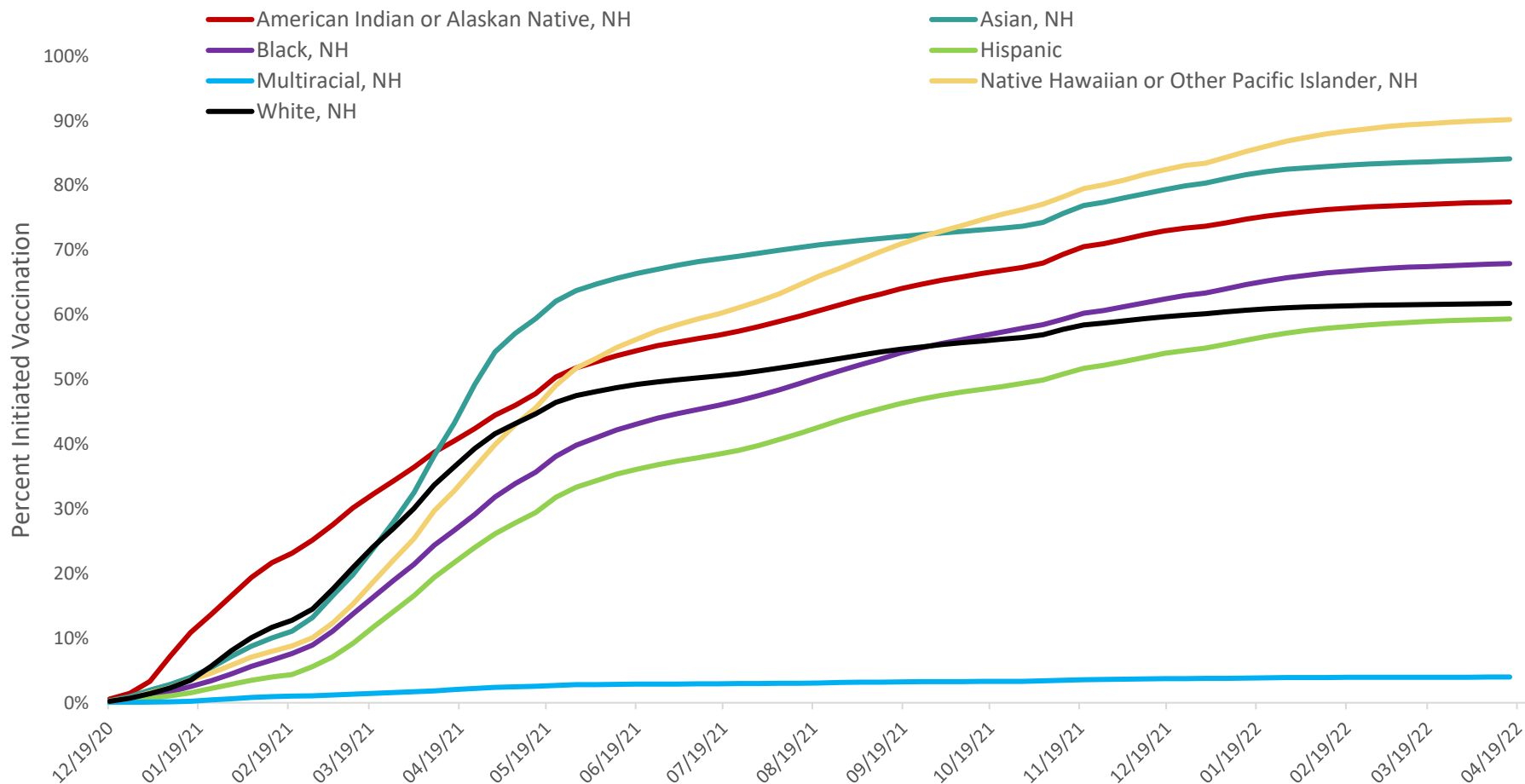
SVI: Vaccination Trends in Washington

Average Percent Initiating Covid-19 Vaccination by Social Vulnerability (SVI) of Census Tract



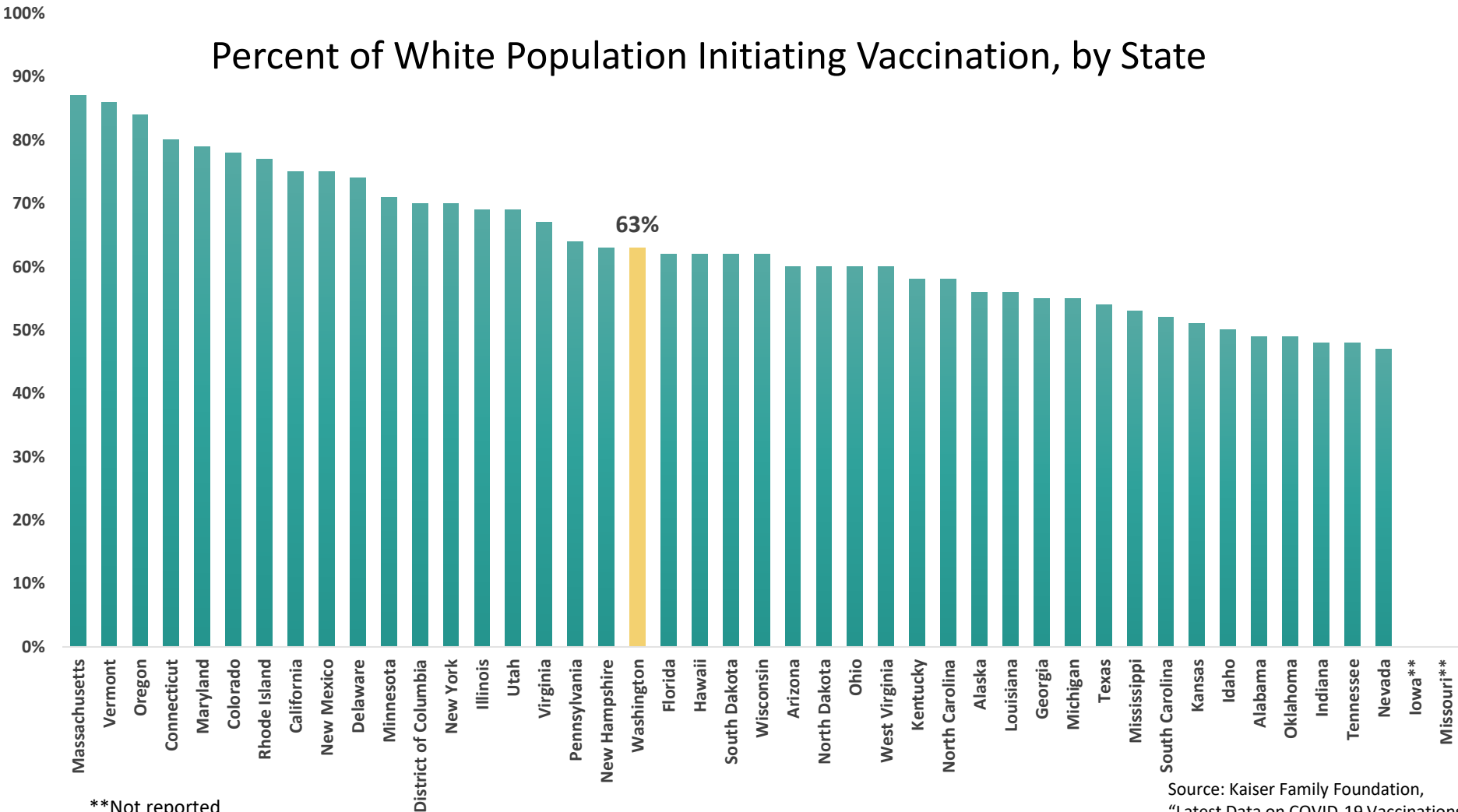
Race/Ethnicity: Vaccination Trends in Washington

Percent of Population that has Initiated Vaccination by Race/Ethnicity and Week



Race/Ethnicity: Washington vs. Other States

Percent of White Population Initiating Vaccination, by State

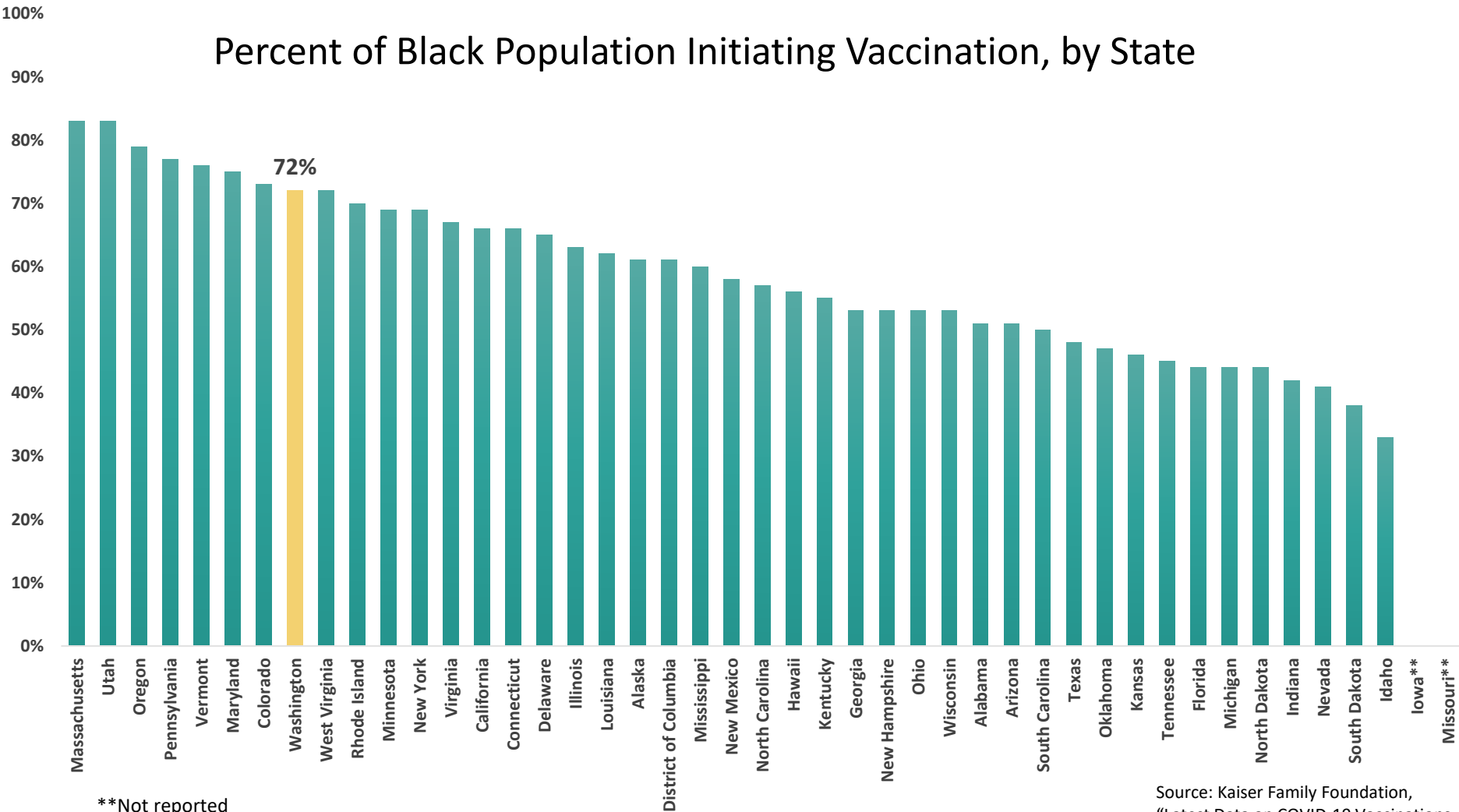


**Not reported

Source: Kaiser Family Foundation, "Latest Data on COVID-19 Vaccinations by Race/Ethnicity" Available: [Latest Data on COVID-19 Vaccinations by Race/Ethnicity | KFF](#)

Race/Ethnicity: Washington vs. Other States

Percent of Black Population Initiating Vaccination, by State



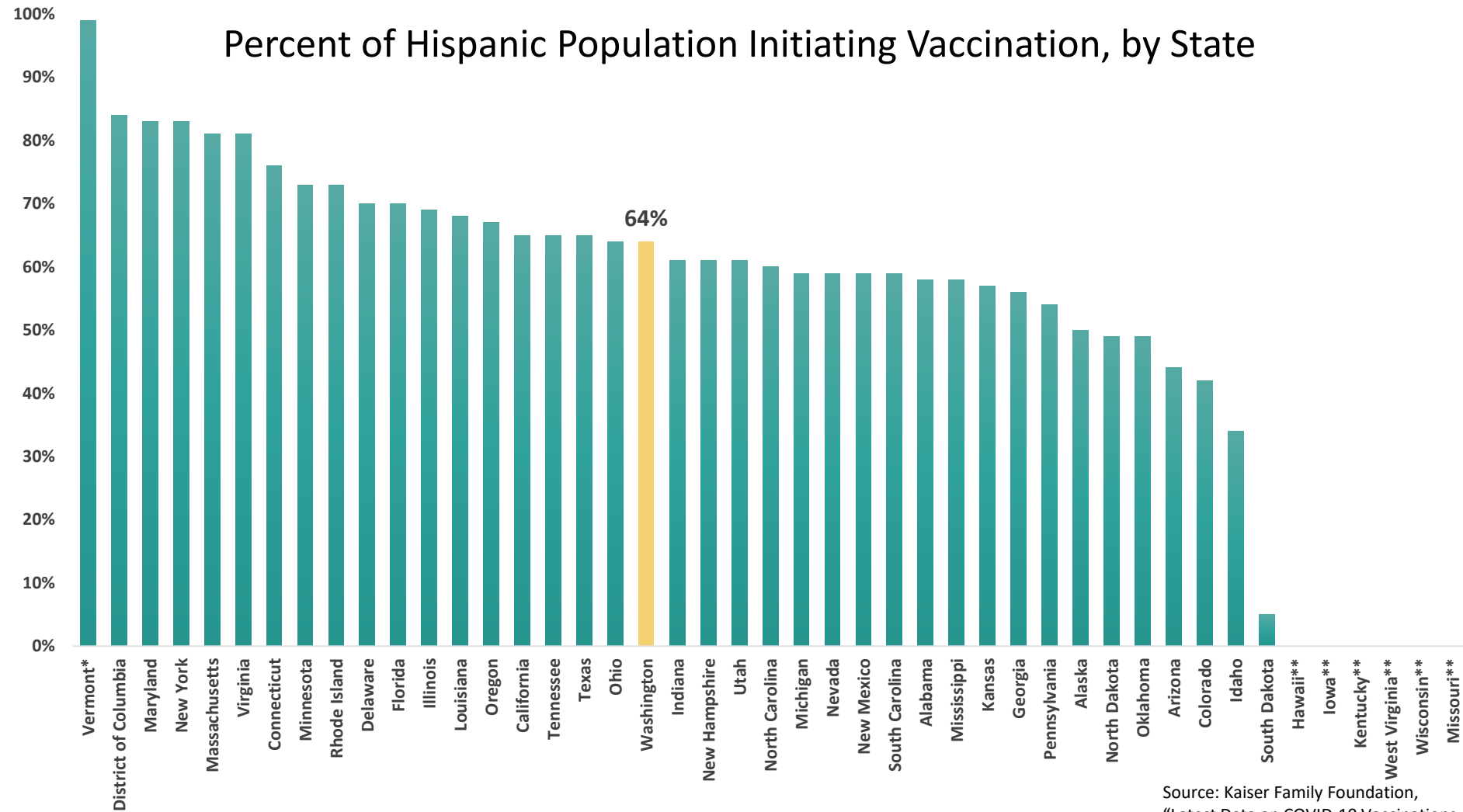
**Not reported

Source: Kaiser Family Foundation,
"Latest Data on COVID-19 Vaccinations
by Race/Ethnicity"

Available: [Latest Data on COVID-19
Vaccinations by Race/Ethnicity](#) | KFF

Race/Ethnicity: Washington vs. Other States

Percent of Hispanic Population Initiating Vaccination, by State



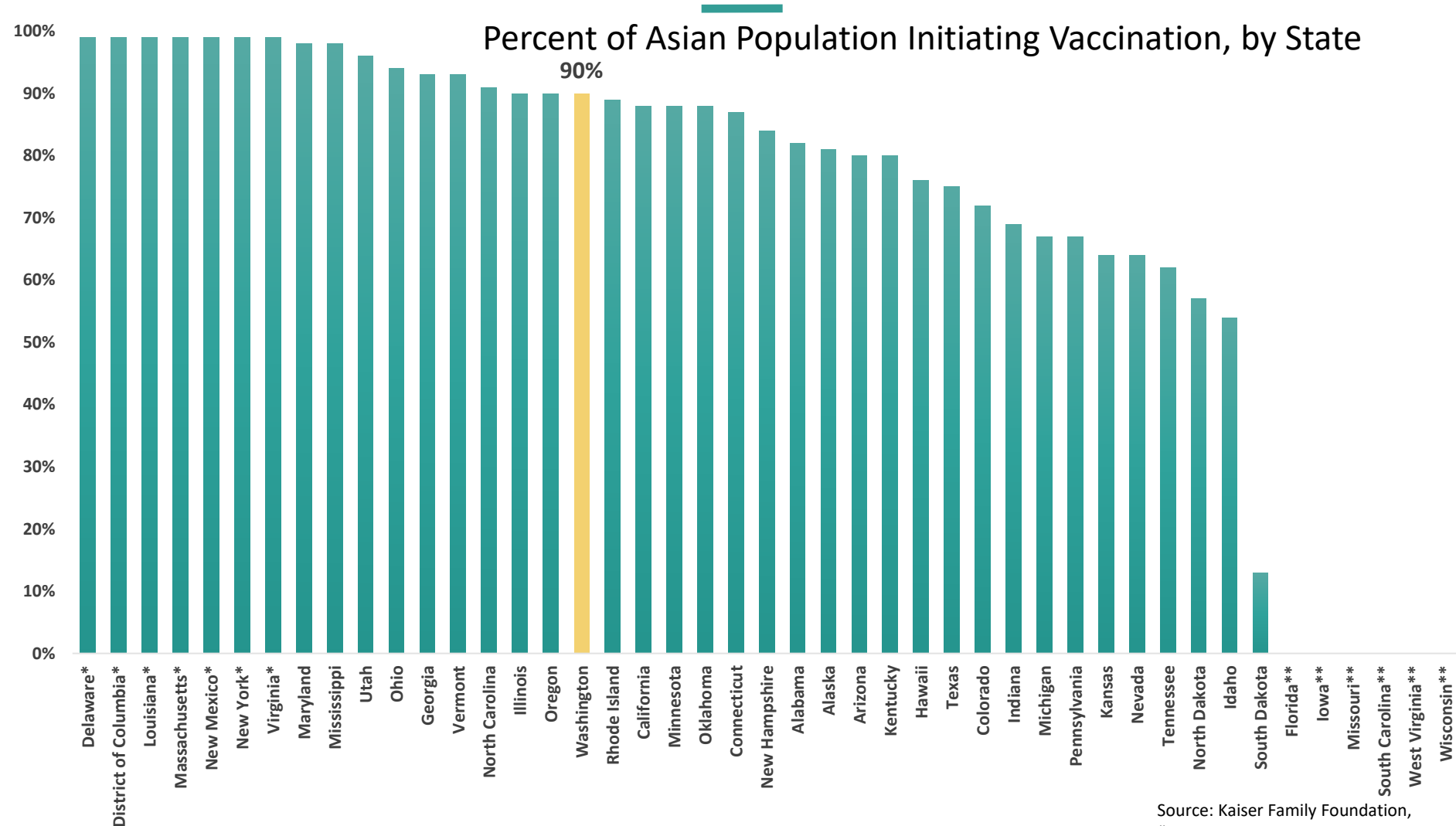
*>99%

**Not reported

Race/Ethnicity: Washington vs. Other States

Percent of Asian Population Initiating Vaccination, by State

90%



* >99%
 ** Not reported

Persons Eligible for Second COVID-19 Booster Dose

- People ages 50 years and older
- People ages 12 years and older who are moderately or severely immunocompromised
- People 18 years and older who received Janssen COVID-19 Vaccine as both a primary and a booster dose.

People who may consider getting the second booster dose as soon as possible:

- People with increased risk of severe COVID-19 illness
- People living with someone who is at increased risk for severe disease
- People at increased risk of exposure to SARS-CoV-2
- People who live or work in or near an area where the [COVID-19 community level](#) is medium or high or are traveling to such an area

People who may consider waiting to receive a second booster dose

- People who have had a SARS-CoV-2 infection within the past 3 months
- People who may be hesitant about getting additional booster doses in the future

COVID-19 vaccination schedule for people who are **not** moderately or severely immunocompromised*

Vaccine	0 month	1 month	2 month	3 month	4 month	5 month	6 month	7 month	8 month	9 month	10 month	11 month
Pfizer-BioNTech (ages 5–11 years)	1 st dose	2 nd dose (3 weeks after 1 st dose)										
Pfizer-BioNTech (ages 12 years and older)	1 st dose	2 nd dose† (3–8 weeks after 1 st dose)					Booster dose† (at least 5 months after 2 nd dose)				See footnote§	
Moderna (ages 18 years and older)	1 st dose	2 nd dose† (4–8 weeks after 1 st dose)					Booster dose† (at least 5 months after 2 nd dose)				See footnote§	
Janssen (ages 18 years and older)	1 st dose		Booster dose† (at least 2 months after 1 st dose)				See footnote§					

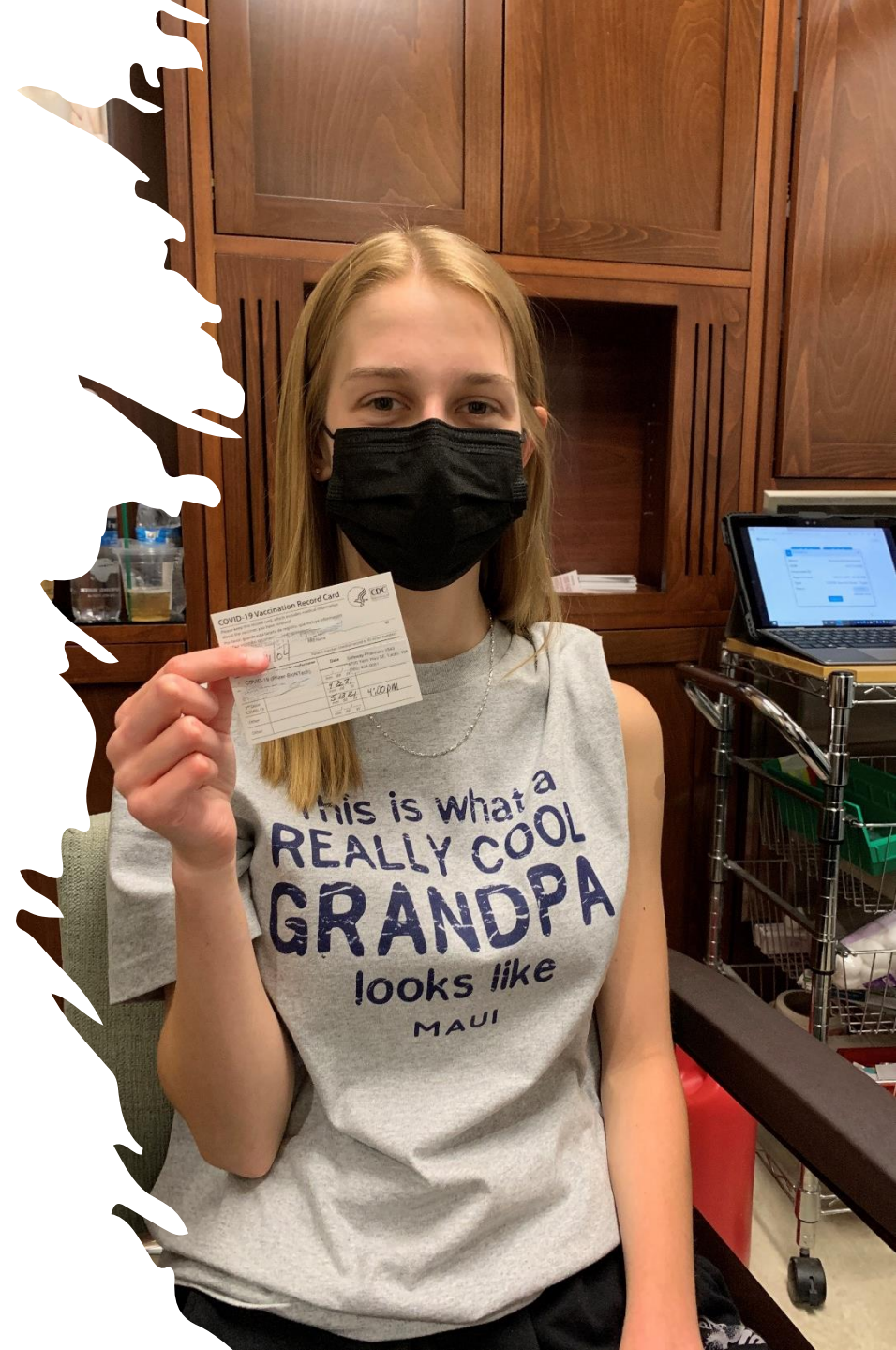
[Clinical Guidance for COVID-19 Vaccination | CDC](#)

6 Months and Older Vaccine

- Tentative late June release
- Not clear if both Moderna and Pfizer will be available
- No product details or series info yet
- Pfizer 6mo - <5 years
- Moderna 6mo - <6 years
- No definitive information on 6-17 years Moderna approval

OnSolve Reminder Recall

- Text, call and email notifications of second dose and booster shots
- Used for messaging on boosters
- Drives people back to providers for additional doses as they become eligible



DOH Efforts: Reminder/ Recalls

- One of many programmatic activities aimed at improving booster coverage across Washington
- Successfully completed **5,561,996** contact attempts related to the 1st Booster Dose Reminder Recall Project
- 2,291,586 (55.2%)** individuals contacted by the 1st booster dose reminder recall initiative have received a booster dose



Special Initiatives

POWER OF PROVIDERS

Updates

POP Welcome Kits

New partnership in place to ensure all providers receive POP welcome kits.

We are moving as fast as we can to get these delivered.

Back to Basics Campaign

New campaign built around the foundations of immunity and vaccinations.

QBRM Feedback

Outreach strategy being created to respond to provider feedback.



Mobile Vaccination

- CARE-A-VAN
- NURSE MOBILE TEAMS
- MASS VACCINATION SITES

Care Van

Caravana de Salud

HEALTH IN MOTION



- WA DOH launched a new mobile COVID-19 vaccination effort June 2021
- Work closely with community partners, Tribal nations and Local Health Jurisdictions to increase access to vaccine for priority communities.
- Over 14,000 doses administered at Care-a-Van events (*as of 5/1/2022*)

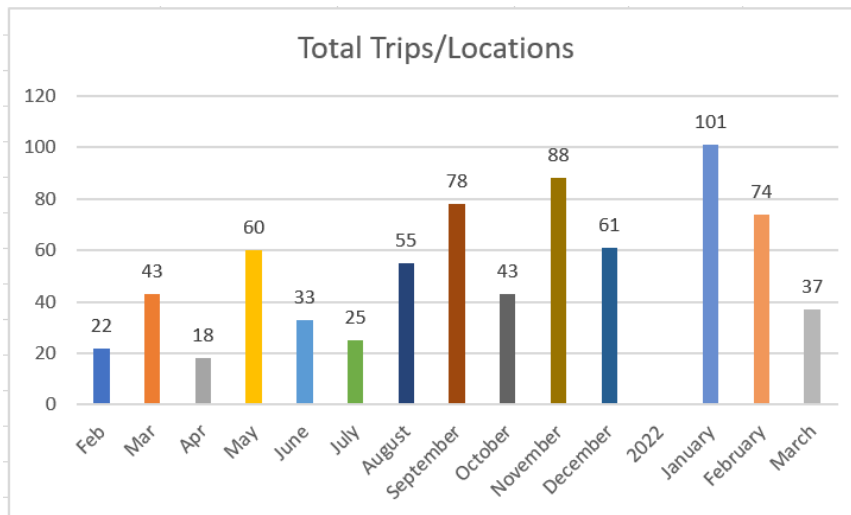
Mass Vaccination

- DOH's partners with contractors to support vaccine administration and work on Care-A-Van events and Mass Vaccine Sites
- **396,029** doses administered
- Mass Vaccination Locations:
 - Wenatchee, Benton, Spokane and Clark
 - Everett Mall- 5 weeks in January/February
 - FEMA partnership
 - Tumwater drive through clinic
 - Fixed site in Federal Way
 - Fixed site at GSA in Auburn with mobile teams
 - Bellingham fixed site and mobile teams

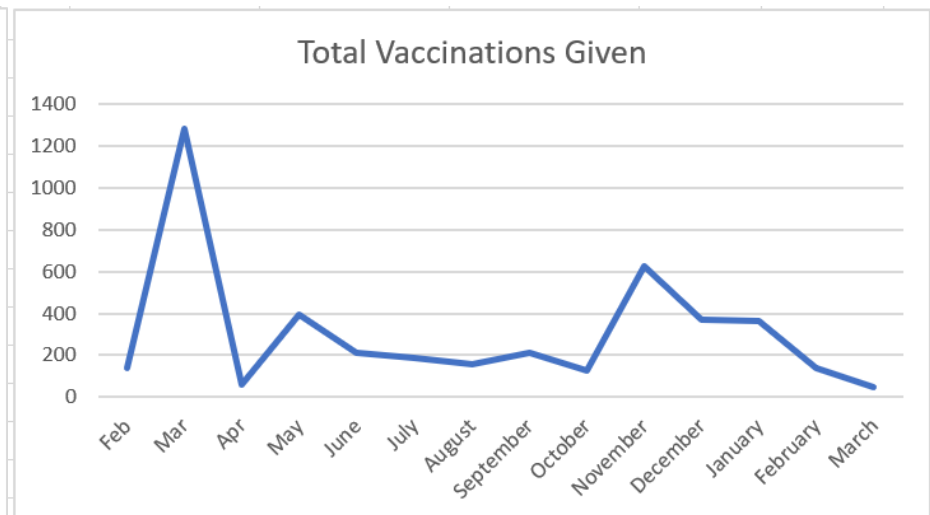


Nurse Mobile Teams

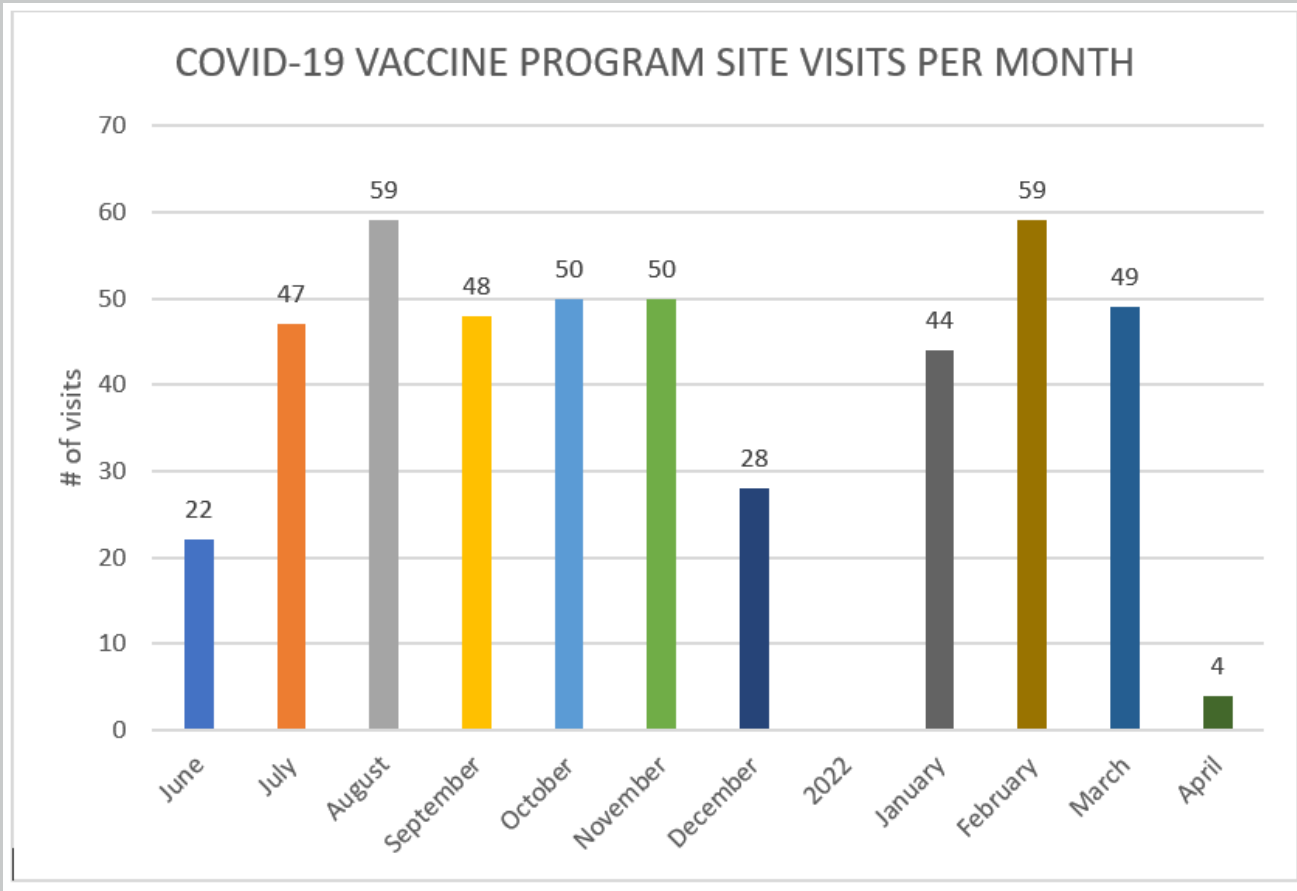
- **Priority outreach populations:** Homebound people, any resident of a long-term care facility or adult family home.
- **Total number of vaccinations:** 4,311 from May 2021 –March 2022.



Number of trips/locations by the Nurse Mobile Team since the start of the program.



Number of homebound vaccinations that were given since starting the program last year.



Site Visits

- Washington State Department of Health has been conducting COVID-19 site visits to all providers in Washington State who receive state-supplied COVID-19 vaccines.
- The Site Visit team reviews requirements and recommendations as set by the CDC and work with providers to ensure their continued success in the vaccination program.
- DOH works with providers to address problems and provide reports that include findings and solutions to correct them.
- Site Visit team has conducted over 500 visits

List of COVID Vaccine Plans

Plans in Progress

- Updated Master Plan with Booster Information (In review)
- Updated Agricultural Worker Plan (In review)
- Pediatric 6m-4-year-old plan (in review)
- Uninsured Population (and end of HRSA funding)
- Mass Vaccination Operational Plan
- Seafood/Maritime Worker Plan
- Vaccine Administration - State to Traditional Healthcare Settings
- Public to Private - Future of COVID-19 Vaccine Purchasing
- Surge Plan

Projects in Progress

- Multi-State Vaccine Strategy Monitoring
- COVID-19 Vaccine Team AAR

Existing Plans

- Agricultural Workers
- Incarcerated Population
- Unhoused Population
- Wildfire Plan
- Booster Plan
- Pediatric 5-11 Plan

Upcoming Plans

- Priority Population Plans
- Rural Population Plan
- Pregnant People Plan

Ongoing campaigns



- Young adults
- Booster promotion
- Black/African Americans (Here for Us and We Consider)
- Hispanic/Latinx (Mariachi)
 - Expanded to a 60-second radio ad
- 5-11 COVID-19 vaccine promotion.



Vaccinate with Confidence

CDC's Strategy to Reinforce Confidence in COVID-19 Vaccines

Build Trust

Objective: Share clear, complete, and accurate messages about COVID-19 vaccines and take visible actions to build trust in the vaccine, the vaccinator, and the system in coordination with federal, state, and local agencies and partners.

- ✓ Communicate transparently about the process for authorizing, approving, making recommendations for, monitoring the safety of, distributing, and administering COVID-19 vaccines, including data handling.
- ✓ Provide regular updates on benefits, safety, side effects and effectiveness; clearly communicate what is not known.
- ✓ Proactively address and mitigate the spread and harm of misinformation via social media platforms, partners, and trusted messengers.

Empower Healthcare Personnel

Objective: Promote confidence among healthcare personnel* in their decision to get vaccinated and to recommend vaccination to their patients.

- ✓ Engage national professional associations, health systems, and healthcare personnel often and early to ensure a clear understanding of the vaccine development and approval process, new vaccine technologies, and the benefits of vaccination.
- ✓ Ensure healthcare systems and medical practices are equipped to create a culture that builds confidence in COVID-19 vaccination.
- ✓ Strengthen the capacity of healthcare professionals to have empathetic vaccine conversations, address myths and common questions, provide tailored vaccine information to patients, and use motivational interviewing techniques when needed.

Engage Communities & Individuals

Objective: Engage communities in a sustainable, equitable and inclusive way—using two-way communication to listen, build trust, and increase collaboration.

- ✓ Empower vaccine recipients to share their personal stories and reasons for vaccination within their circles of influence.
- ✓ Work with health departments and national partners to engage communities around vaccine confidence and service delivery strategies, including adaptation of vaccination sites to meet community needs.
- ✓ Collaborate with trusted messengers—such as faith-based and community leaders—to tailor and share culturally relevant messages and materials with diverse communities.

*Personnel = All staff working in healthcare settings, including physicians, PAs/NPs, nurses, allied health professionals, pharmacists, social workers, support staff, and community health workers



VAERS Vaccine Adverse Event Reporting System
www.vaers.hhs.gov



COVID-19 Vaccine policy

Find the latest policy on the [COVID-19 Information page](#)

Provider, billers, and partners (Apple Health)

Telehealth policies and FAQs have moved. Find all iterations published since March 2020 on our [provider guides and fee schedules page](#).

COVID-19 resources

Testing and treatment



Vaccination information



- [COVID-19 vaccine policy](#)
- [COVID-19 vaccination rates](#)

Looking forward



- Pediatric Vaccinations
- Priority Populations
- Additional Boosters

Coronavirus (COVID-19) Update: FDA Announces Tentative Advisory Committee Meeting Schedule Regarding COVID- 19 Vaccines

[Coronavirus \(COVID-19\) Update: FDA Announces Tentative Advisory Committee Meeting Schedule Regarding COVID- 19 Vaccines | FDA](#)

- On June 7, FDA intends to convene VRBPAC to discuss an EUA request for a COVID-19 vaccine manufactured by Novavax to prevent COVID-19 in individuals 18 years of age and older.
- On June 8, 21 and 22, the FDA has held dates for the VRBPAC to meet to discuss updates to the Moderna and Pfizer-BioNTech EUAs for their COVID-19 vaccines to include younger populations. As the sponsors complete their submissions and the FDA reviews that data and information, it will provide additional details on scheduling of the VRBPAC meetings to discuss each EUA request.
- On June 28, the FDA plans to convene the VRBPAC to discuss whether the SARS-CoV-2 strain composition of COVID-19 vaccines should be modified, and if so, which strain(s) should be selected for Fall 2022. This meeting is a follow-up to the April 6 VRBPAC meeting that discussed general considerations for future COVID-19 vaccine booster doses and the strain composition of COVID-19 vaccines to further meet public health needs.



IMMUNIZATION REQUIREMENTS FOR SCHOOL & CHILD CARE

Office of Immunization

Immunization Requirements

April 2022



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Office of Immunization

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IMMUNIZATION REQUIREMENTS CHARTS 2022-2023 CHANGES

Transitional Kindergarten

OSPI definition:

Transitional Kindergarten (TK) is a kindergarten program for children, **below the age of five**, who do not have access to high-quality early learning experiences prior to kindergarten. Additionally, they have been deemed by a school district, through a screening process and/or other instrument(s), to be in need of additional preparation to be successful in kindergarten the following year.

The TK page on the OSPI

website: <https://www.k12.wa.us/student-success/support-programs/early-learning-washington-state/state-funded-full-day-kindergarten/transitional-kindergarten>

Washington Administrative Code (WAC)

The immunization laws give the WA State Board of Health the authority to determine the immunization rules

246-105 WAC **Immunization of childcare and school children against certain vaccine-preventable diseases**

246-105-010 - through 246-105-090

- As part of the implementation guidelines, the department (DOH) shall align the ages and intervals specified in the national immunization guidelines and this chapter with a corresponding grade level.
- Schools shall accept proof of immunization status by grade level as required by subsection (2) of this section.

Definition of School

RCW [28A.210.070](#) defines:

(6) "School" shall mean and include each building, facility, and location at or within which any or all portions of a **preschool, kindergarten and grades one through twelve** program of education and related activities are conducted for two or more children by or in behalf of any public school district and by or in behalf of any private school or private institution subject to approval by the state board of education pursuant to RCW [28A.305.130](#), [28A.195.010](#) through [28A.195.050](#), and [28A.410.120](#).

WAC [246-105-020](#) defines:

(20) "School" means a facility, site, or campus for programs of education as defined in RCW [28A.210.070](#) to include **preschool and kindergarten through grade twelve**.

CDC Schedule

The CDC [Birth-18 Years Immunization Schedule | CDC](#) is based on the age of the child. Two key changes to the schedule happen at age 4-6 years:

PCV and Hib are only routinely recommended for children through age 4 years. Once they turn 5 additional doses are not recommended (even if they didn't finish the series) unless the child has specific medical conditions.

DTaP/IPV/MMR and varicella doses are recommended at age 4-6 years of age **or school entry**.

- MMWR: [Prevention of Varicella: Recommendations of the Advisory Committee on Immunization Practices \(ACIP\) \(cdc.gov\)](#)
 - **School-Aged Children**: A second dose of varicella vaccine is recommended routinely for all children aged 4--6 years (i.e., **before entering prekindergarten, kindergarten, or first grade**). However, it may be administered at an earlier age provided that the interval between the first and second dose is >3 months.
 - Because of the risk for transmission of VZV in schools, all children entering school should have received 2 doses of varicella-containing vaccine or have other evidence of immunity to varicella (see Evidence of Immunity).

CDC Schedule

- MMWR: [Prevention of Pertussis, Tetanus, and Diphtheria with Vaccines in the United States: Recommendations of the Advisory Committee on Immunization Practices \(ACIP\) | MMWR \(cdc.gov\)](#)
 - The fifth (second booster) dose should be administered to children aged 4–6 years to confer continued protection against disease during the early years of schooling. and
 - Children aged 4–6 years who complete a primary series of DT before their fourth birthday should receive a fifth dose of DT by the time of **school entry** to confer continued protection against disease.
- MMWR: [Prevention of Measles, Rubella, Congenital Rubella Syndrome, and Mumps, 2013 \(cdc.gov\)](#)
 - For the prevention of measles, mumps, and rubella, vaccination is recommended for persons aged ≥12 months. For the prevention of measles and mumps, ACIP recommends 2 doses of MMR vaccine routinely for children with the first dose administered at age 12 through 15 months and the second dose administered at age 4 through 6 years **before school entry**.
 - In 1989, because of reported measles outbreaks among vaccinated school-aged children, ACIP and AAFP recommended 2 doses; with the first dose at age 15 months and the second dose at age 4 through 6 years, **before school entry**.
- MMWR: [Poliovirus Prevention in the United States \(cdc.gov\)](#)
 - All children who have received three doses of IPV before age 4 years should receive a fourth dose **before or at school entry**.

2022-2023 Changes

The school immunization requirements now include transitional kindergarten and preschool. www.doh.wa.gov/scci.

- Updated immunization requirements for kindergarten(including transitional kindergarten), and preschool will apply to children 4 years and older.
- Children who are 4 years old on September 1 will need booster doses of DTaP, IPV, MMR, and varicella. Children will also need PCV and Hib vaccines until they reach age 5.
- Children who turn 4 years old after September 1 do not need to meet the requirements for 4-year-olds until the next school year.

Vaccines Required for Preschool-12 School 2022-2023

Vaccines Required for School: Preschool -12th

August 1, 2022 to July 31, 2023



	DTaP/Tdap (Diphtheria, Tetanus, Pertussis)	Hepatitis B	Hib (<i>Haemophilus influenzae</i> type B)	MMR (Measles, mumps rubella)	PCV (Pneumococcal Conjugate)	Polio	Varicella (Chickenpox)
Preschool Age 19 months to <4 years on 09/01/2022	4 doses DTaP	3 doses	3 or 4 doses** (depending on vaccine)	1 dose	4 doses**	3 doses	1 dose***
Preschool/Kindergarten (including Transitional Kindergarten) Age =4* years on 09/01/2022	5 doses DTaP**	3 doses	3 or 4 doses** (depending on vaccine) (Not required at age ≥5 years)	2 doses	4 doses** (Not required at age ≥5 years)	4 doses**	2 doses***
Kindergarten through 6th Age ≥5 years on 09/01/2022	5 doses DTaP**	3 doses	Not Required	2 doses	Not Required	4 doses**	2 doses***
7th through 9th	5 doses DTaP** Plus Tdap at age ≥10 years	3 doses	Not Required	2 doses	Not Required	4 doses**	2 doses***
10th through 12th	5 doses DTaP** Plus Tdap at age ≥7 years	3 doses	Not Required	2 doses	Not Required	4 doses**	2 doses***

*Consistent with ACIP CDC Immunization Schedule. **Vaccine doses may be acceptable with fewer than listed depending on when they were given. ***Health care provider verification of history of chickenpox disease is also acceptable. See the Minimum Age and Interval Table on page 2 for required minimum age and spacing information of vaccine doses.

Find information on other vaccines that are recommended, but not required, for child care/preschool attendance at: www.immunize.org/cdc/schedules.

Review the Individual Vaccine Requirements Summary for more detailed information, located on our web page: www.doh.wa.gov/SCCI

To request this document in another format, call 1-800-525-0127.

Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.

DOH 348-051 Dec 2021

Vaccines Required for Preschool-12 School 2022-2023

Vaccines Required for School: Preschool -12th

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DOH 348-051 Dec 2021

Vaccines Required for Preschool-12 School 2022-2023

Vaccine	Dose #	Minimum Age	Minimum Interval* Between Doses	Notes
Hepatitis B (Hep B)	Dose 1	Birth	4 weeks between dose 1 & 2	2 doses are acceptable if both doses are documented as adult doses of Recombivax HB* given between ages 11 and 15. The doses must be separated by at least 4 months.
	Dose 2	4 weeks	8 weeks between dose 2 & 3	
	Dose 3	24 weeks	16 weeks between dose 1 & 3	
Diphtheria, Tetanus, and Pertussis (DTaP and Tdap)	Dose 1	6 weeks	4 weeks between dose 1 & 2	A 6 month interval is recommended between dose 3 and dose 4, but a minimum interval of 4 months is acceptable. Dose 5 not needed if dose 4 on or after the 4th birthday and at least 6 months after dose 3
	Dose 2	10 weeks	4 weeks between dose 2 & 3	
	Dose 3	14 weeks	6 months between dose 3 & 4	
	Dose 4	12 months	6 months between dose 4 & 5	DTaP can be given to children through age 6. If catch-up doses are needed at age 7 and older, Tdap is used followed by additional doses of Tdap or Td if needed.
	Dose 5	4 years	—	A Tdap booster dose is required for all students in grades 7-12.
	Booster	10 years	—	For students in 7th –9th grade, Tdap dose is acceptable if given on or after 10 years of age.
Haemophilus influenzae type B (Hib)	Dose 1	6 weeks	4 weeks between dose 1 & 2	If all 3 doses of PedvaxHIB given, only need 3 doses total. Dose 3 must be ≥12 months of age. Only one dose required if the dose is given on or after 15 months of age. Age ≥5 years: Not required because not routinely given to children age 5 years and older.
	Dose 2	10 weeks	4 weeks between dose 2 & 3	
	Dose 3	14 weeks	8 weeks between dose 3 & 4	
	Dose 4	12 months	—	
Pneumococcal Conjugate (PCV13)	Dose 1	6 weeks	4 weeks between dose 1 & 2	Only one dose is required if the dose is given on or after 24 months of age. Age ≥5 years: Not required because not routinely given to children age 5 years and older.
	Dose 2	10 weeks	4 weeks between dose 2 & 3	
	Dose 3	14 weeks	8 weeks between dose 3 & 4	
Polio (IPV or OPV)	Dose 1	6 weeks	4 weeks between dose 1 & 2	Dose 4 not needed if dose 3 on or after the 4th birthday and at least 6 months after dose 2. OPV given on or after 04/01/16 cannot be accepted as a valid dose in the series. Completing the polio series is recommended but not required for students 18 years of age and older. For 12 grade minimum age and intervals see Individual Vaccine Requirements Summary link below
	Dose 2	10 weeks	4 weeks between dose 2 & 3	
	Dose 3	14 weeks	6 months between dose 3 & 4	
	Dose 4	4 years	—	
Measles, Mumps, and Rubella (MMR or MMRV)	Dose 1	12 months	4 weeks between dose 1 & 2	MMRV (MMR + Varicella) may be used in place of separate MMR and varicella vaccines. Must be given the same day as varicella OR at least 28 days apart, also see* footnote.
	Dose 2	13 months	—	
Varicella (Chickenpox) (VAR)	Dose 1	12 months	3 months between dose 1 & 2 (12 months through 12 years). 4 weeks between dose 1 & 2 (13 years and older)	Recommended: 3 months between varicella doses, but at least 28 days minimum interval is acceptable. Healthcare provider verification of disease history is acceptable to document immunity. Must be given the same day as MMR OR at least 28 days apart, also see* footnote.
	Dose 2	15 months	—	

*The 4 day grace period can be applied to all doses except between two doses of different live vaccines (such as MMR, MMRV, varicella, and Flumist).

See the Individual Vaccine Requirements Summary for more details about the schedules: <https://www.doh.wa.gov/SCCI>

DOH 348-051 March 2022

Vaccines Required for Child Care 2022-2023

Vaccines Required for Child Care



	Hepatitis B	DTaP (Diphtheria, Tetanus, Pertussis)	Hib (<i>Haemophilus influenzae</i> type B)	Polio	PCV (Pneumococcal Conjugate)	MMR (Measles, mumps rubella)	Varicella (Chickenpox)
By 3 Months	2 doses	1 dose	1 dose	1 dose	1 dose	Not routinely given before 12 months of age	Not routinely given before 12 months of age
By 5 Months	2 doses	2 doses	2 doses	2 doses	2 doses		
By 7 Months	2 doses	3 doses	2 or 3 doses (depending on vaccine)	2 doses	3 doses		
By 16 Months	2 doses	3 doses	3 or 4 doses (depending on vaccine)	2 doses	4 doses	1 dose	1 dose
By 19 Months	3 doses	4 doses	3 or 4 doses (depending on vaccine)	3 doses	4 doses	1 dose	1 dose
By 7 years or preschool/ school entry at ≥ 4 years*	3 doses	5 doses	Not routinely given to children age 5 years and older	4 doses	Not routinely given to children age 5 years and older	2 doses	2 doses

*Children attending Preschool-12th grade must meet the immunization requirements for their grade in school.

Find the Preschool-12th grade requirement chart and in the Individual Vaccine Requirements Summary immunization requirements section of the web page: www.doh.wa.gov/SCCI

See the Minimum Age and Interval Table on page 2 for required minimum age and spacing information of vaccine doses.

Find information on other vaccines that are recommended, but not required, for child care/preschool attendance at: www.immunize.org/cdc/schedules.

To request this document in another format, call 1-800-525-0127.

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DOH 348-053 Dec 2021

Vaccines Required for Child Care 2022-2023

Vaccines Required for Child Care



	Hepatitis B	DTaP (Diphtheria, Tetanus, Pertussis)	Hib (<i>Haemophilus influenzae</i> type B)	Polio	PCV (Pneumococcal Conjugate)	MMR (Measles, mumps rubella)	Varicella (Chickenpox)
By 3 Months	2 doses	1 dose	1 dose	1 dose	1 dose	Not routinely given before 12 months of age	Not routinely given before 12 months of age
By 5 Months	2 doses	2 doses	2 doses	2 doses	2 doses		
By 7 Months	2 doses	3 doses	2 or 3 doses (depending on vaccine)	2 doses	3 doses		
By 16 Months	2 doses	3 doses	3 or 4 doses (depending on vaccine)	2 doses	4 doses	1 dose	1 dose
By 19 Months	3 doses	4 doses	3 or 4 doses (depending on vaccine)	3 doses	4 doses	1 dose	1 dose
By 7 years or preschool/ school entry at ≥ 4 years*	3 doses	5 doses	Not routinely given to children age 5 years and older	4 doses	Not routinely given to children age 5 years and older	2 doses	2 doses

*Children attending Preschool-12th grade must meet the immunization requirements for their grade in school.

Find the Preschool-12th grade requirement chart and in the Individual Vaccine Requirements Summary immunization requirements section of the web page: www.doh.wa.gov/SCCI

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DOH 348-053 Dec 2021

Vaccines Required for Child Care 2022-2023

Vaccine	Dose #	Minimum Age*	Minimum Interval* Between Doses	Notes
Hepatitis B (HepB)	Dose 1	Birth	4 weeks between dose 1 & 2	The final dose in the series should be given at least 24 weeks of age.
	Dose 2	4 weeks	8 weeks between dose 2 & 3	
	Dose 3	24 weeks	16 weeks between dose 1 & 3	
Diphtheria, Tetanus, and Pertussis (DTaP)	Dose 1	6 weeks	4 weeks between dose 1 & 2	Typical vaccine schedule: 2, 4, 6 and 15-18 months of age.
	Dose 2	10 weeks	4 weeks between dose 2 & 3	Recommended: 6 months between dose 3 and 4, but at least 4 months minimum interval acceptable.
	Dose 3	14 weeks	6 months between dose 3 & 4	
Haemophilus influenzae type B (Hib)	If all 3 doses of PedvaxHIB given, only need 3 doses total. Dose 3 must be ≥ 12 months of age.			
Pneumococcal Conjugate (PCV13)	Only one dose required if the dose is given on or after 15 months of age. Review the Individual Vaccine Requirements Summary for minimum doses required: https://www.doh.wa.gov/SCCI			
	Dose 4	12 months	—	
Polio (IPV or OPV)	Dose 1	6 weeks	4 weeks between dose 1 & 2	Three doses are acceptable if the child received dose 3 on or after their 4th birthday.
	Dose 2	10 weeks	4 weeks between dose 2 & 3	
	Dose 3	14 weeks	6 months between dose 3 & 4	
	Dose 4	4 years	—	
Measles, Mumps, and Rubella (MMR or MMRV)	Dose 1	12 months	4 weeks between dose 1 & 2	MMRV (MMR + Varicella) may be used in place of separate MMR and varicella vaccines. Must be given the same day as varicella OR at least 28 days apart, also see* footnote.
	Dose 2	13 months	—	
Varicella (Chickenpox) (VAR)	Dose 1	12 months	3 months between dose 1 & 2 (12 months through 12 years). 4 weeks between dose 1 & 2 (13 years and older)	Recommended: 3 months between varicella doses, but at least 28 days minimum interval is acceptable. Must be given the same day as MMR OR at least 28 days apart, also see* footnote.
	Dose 2	15 months	—	

*The 4 day grace period can be applied to all doses except between two doses of different live vaccines (such as MMR, MMRV, varicella, and Flumist).

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DOH 348-053 Dec 2021



INDIVIDUAL VACCINE REQUIREMENTS SUMMARY

Guidelines on Immunizations Required for Child Care/Preschool and School Entry in Washington State
SCHOOL YEAR 2022-2023

INTRODUCTION

The Individual Vaccine Requirements Summary (IVRS) is a companion piece to the [Vaccines Required charts](#) for child care/preschool and school entry. The purpose of the summary is to assist school and child care staff and those working with student information systems to understand state immunization requirements and the immunization schedule. Both the requirements and schedule are based on the recommendations of the national Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP).

Requirements are listed in alphabetical order by vaccine. In each section, you will find detailed information about the immunization schedule, the exceptions to the schedule and the catch-up schedule. Exceptions may apply when the ACIP recommendations are not followed.

Find the ACIP schedules here: www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html

IVRS: Individual Vaccine Requirements Summary

Available on our website:
www.doh.wa.gov/SCCI

Resources

School and Child Care Immunization Page

Website:

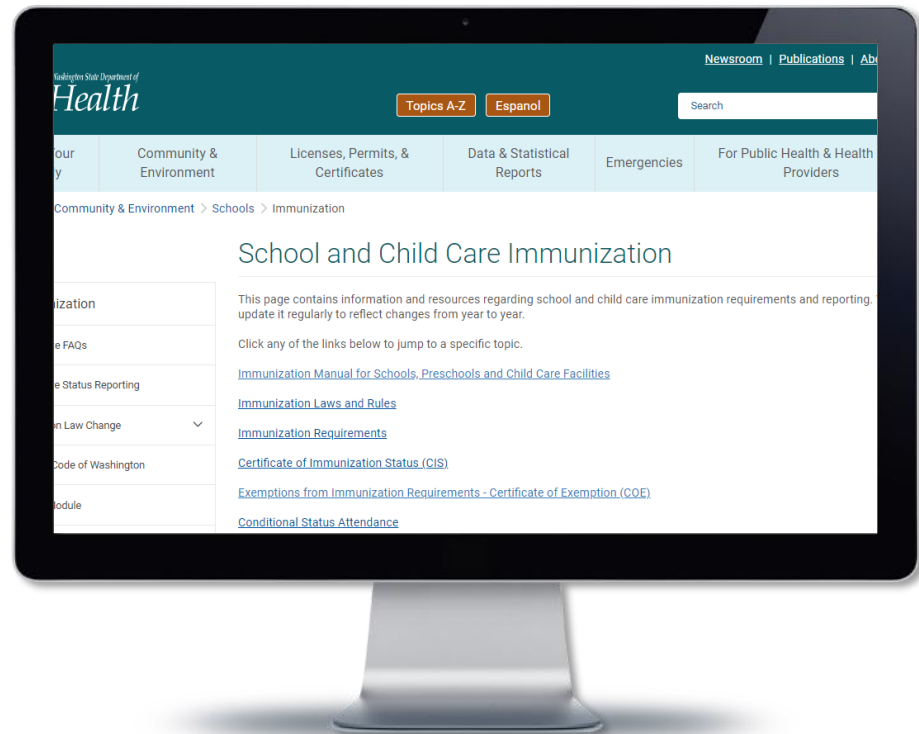
www.doh.wa.gov/SCCI

Questions?

Feedback!

Email us at:

OICPSchools@doh.wa.gov



Resources

School and Child Care Immunization Charts

2022-2023 Changes Quick Reference Guide

The Office of the Superintendent for Public Instruction (OSPI) formally recognized transitional kindergarten (TK) as part of kindergarten in 2018. As a result, the Department of Health (DOH) updated the school immunization requirements. This document explains the changes DOH made to the requirements for the 2022-2023 school year. These changes align with OSPI's TK definition and the Advisory Committee on Immunization Practice's (ACIP) immunization recommendations.

1

Preschool immunization requirements moved from the child care immunization chart to the school chart. New requirements were added for students four years of age.

2

Students in preschool or kindergarten, including TK, who are four years old or older on September 1st are required to have the additional dose of DTaP, IPV, MMR and varicella vaccines. Schools do not need to monitor students who turn four during the school year.

3

Students between the ages of 4 and 5 on September 1st will also need PCV and Hib vaccines for school entry.

Students with summer birthdays will have less time to get vaccinated before the start of school. Parents should plan ahead and schedule their child's vaccination appointment before the school year starts.

You can find the 2022-2023 school and child care immunization charts at [doh.wa.gov/scci](https://www.doh.wa.gov/scci).

DOH #348-866 Feb 2022

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2022-2023 Changes:
1-page Reference
Guide

Available on our website:
www.doh.wa.gov/SCCI

Resources

Early Learning and Child Care Flyer

Available on our website:
www.doh.wa.gov/SCCI

VACCINE REQUIREMENTS Early Learning and Child Care



What vaccines do children need for early learning or child care programs?

Children attending child care are required to show proof of vaccination or acquired immunity against the following vaccine-preventable diseases:

- Diphtheria, Tetanus, Pertussis (DTaP/DT)
- Polio (IPV vaccine)
- Measles, Mumps, Rubella (MMR vaccine)
- Hepatitis B vaccine
- *Haemophilus influenzae* type b (Hib vaccine)
- Chickenpox (Varicella vaccine)
- Pneumococcal bacteria (PCV vaccine)

See the Department of Health's vaccine requirements section of the school and child care web page for specific vaccine dose requirements and forms.

WWW.DOH.WA.GOV/SCCI#REQS

What does a child need to enter an early learning or child care program?

A child may begin an early learning or child care program if they meet all of the following:

- The child has all required vaccine doses needed for their age.
- The parent or guardian has submitted medically verified records to the program by the first day of attendance.

A parent/guardian may submit an official Certificate of Exemption form to exempt the child from certain vaccine requirements.

What qualifies as a medically verified record?

Any of the documentation listed below can be accepted by early learning and child care programs.

- A Certificate of Immunization Status (CIS) printed from the Immunization Information System (usually by a healthcare provider)
- A physical or hand-filled CIS form with a parent signature, with attached medical records.
- A physical or hand-filled CIS form with a healthcare provider signature
- A CIS printed out from MyIR, the state's portal for families to access their immunization records online

Resources

Find a local vaccination clinic at IMMUNITYCOMMUNITYWA.ORG

Questions about child care immunization requirements? Email OICPCSCHOOLS@DOH.WA.GOV

Access your official immunization records at MYIRMOBILE.COM

To request this document in another format, call 1-800-525-0127.

DOH 348-849 OCT 2021

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EFFECTS OF COVID-19 PANDEMIC ON ROUTINE CHILDHOOD VACCINATION COVERAGE



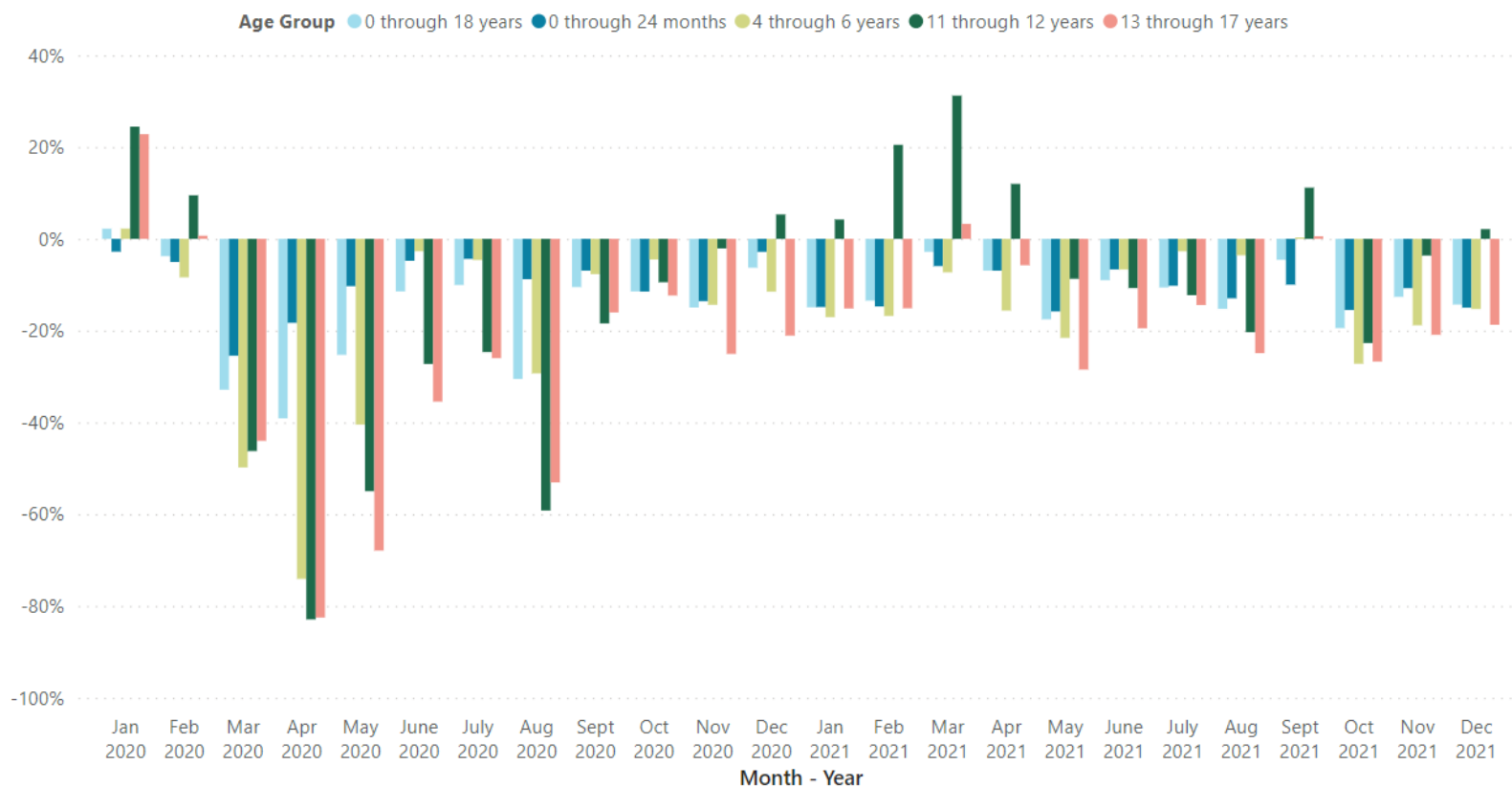
VAC – May 5, 2022

Background

- Human coronavirus 2019 (COVID-19) first observed in the USA in Washington state (WA)
- WA declared a state of emergency Feb 29, 2020
- Various public health measures implemented to keep public safe
- Resulted in:
 - postponement of elective medical care
 - impact on preventative care
 - effect on routine childhood vaccinations
- Aimed to assess the effect of COVID-19 on vaccination coverage of routine childhood immunization

Currently administration is 13.1% lower compared to pre-pandemic levels

Monthly Percent Change in Vaccines* Administered Comparing
Average Number in 2015-2019 with 2020-2021-2022, Various Age Groups, Washington State



Data source: WA State Immunization Information System; all vaccines reported as of 03/14/2022

*Does not include Influenza and COVID-19 vaccine doses administered

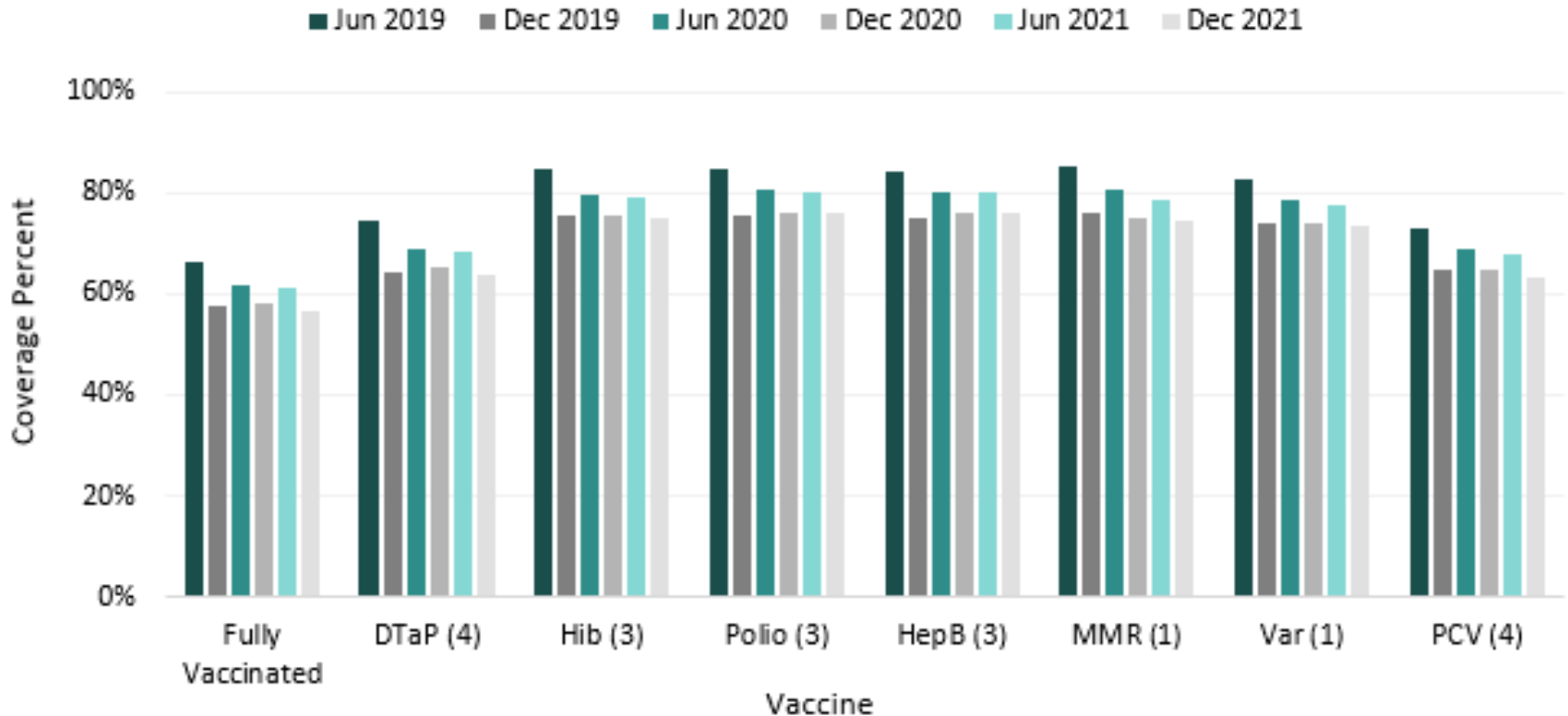
Methods

- Extracted data from WAIS and previously published coverage estimates
- Reviewed vaccination coverage for four age groups:
 - 19-35 months - 4:3:1:3:3:1:4 series
 - 4-6 years – 5:4:4:3:2:2:2:4 series
 - 11-12 years – 1:1:1 series
 - 13-17 years – 1:1:UTD series
- Considered six time points: June 2019, December 2019, June 2020, December 2020, June 2021, December 2021
- Assessed coverage at the state level, by county of residence, and by age month or year (only for 2020 and 2021)

Results

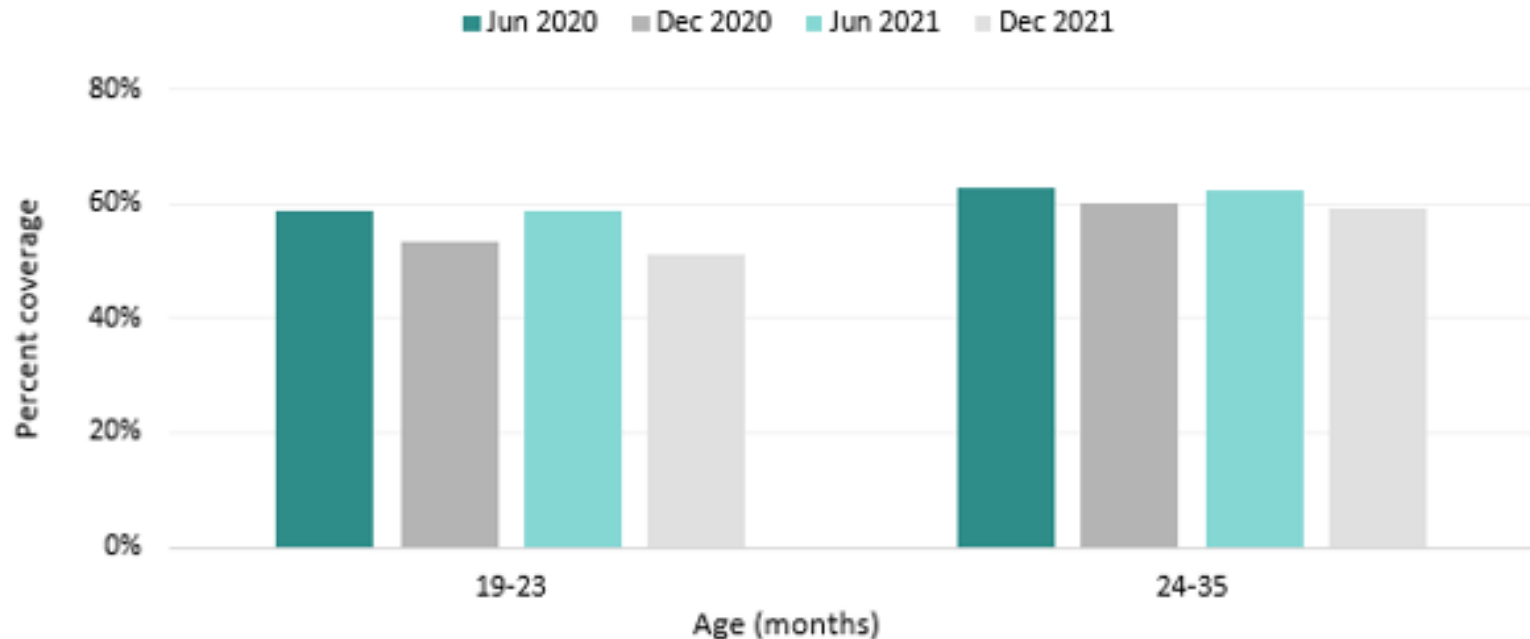
19-35 month olds *by vaccine*

- 9.6% overall decrease in coverage for the series
- Trend is unclear



Fully vaccinated 19-35 month olds *by age*

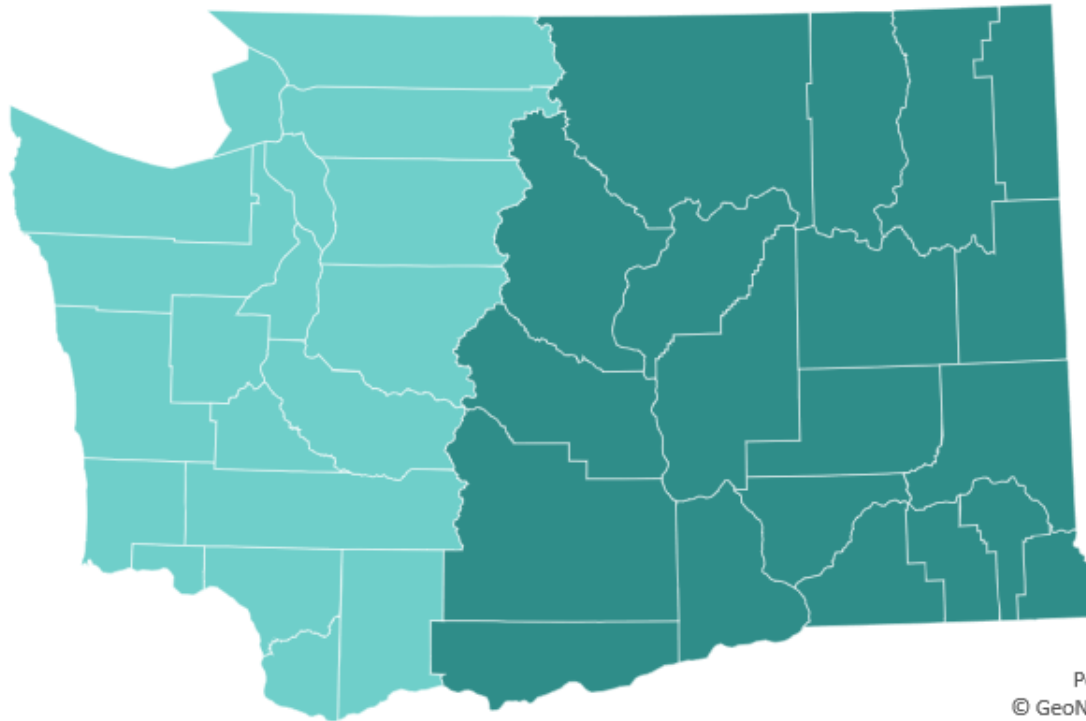
- See similar trend with overall decreases by age (months)
- 7.8% decrease in 19-23m
- 4.0% decrease in 24-35m



Fully vaccinated 19-35 month olds *by county*

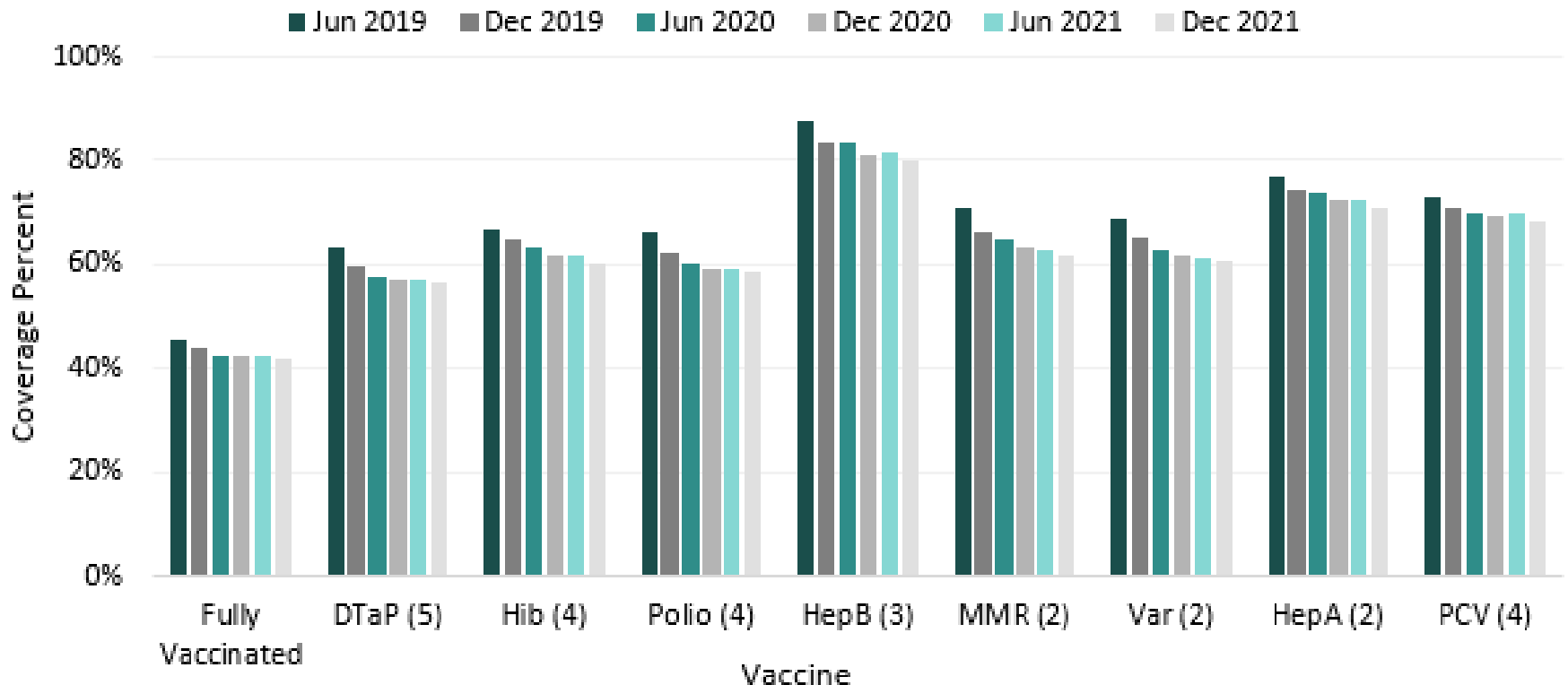
- 87% of counties saw decreases in coverage $\geq 5\%$
- 85% eastern counties
- 89% western counties

Eastern and Western Washington Counties



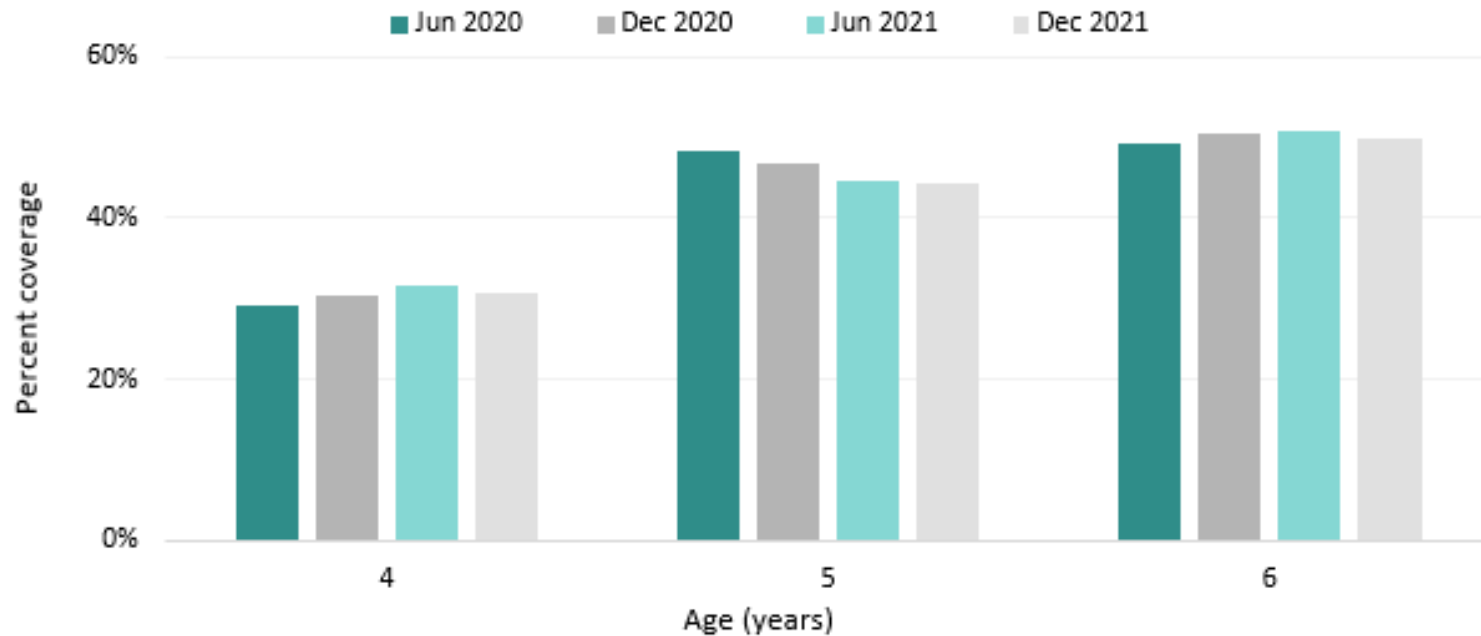
4-6 year olds by vaccine

- 3.9% overall decrease in coverage for the series
- Initial sharp decline which eases with time



Fully vaccinated 4-6 year olds *by age*

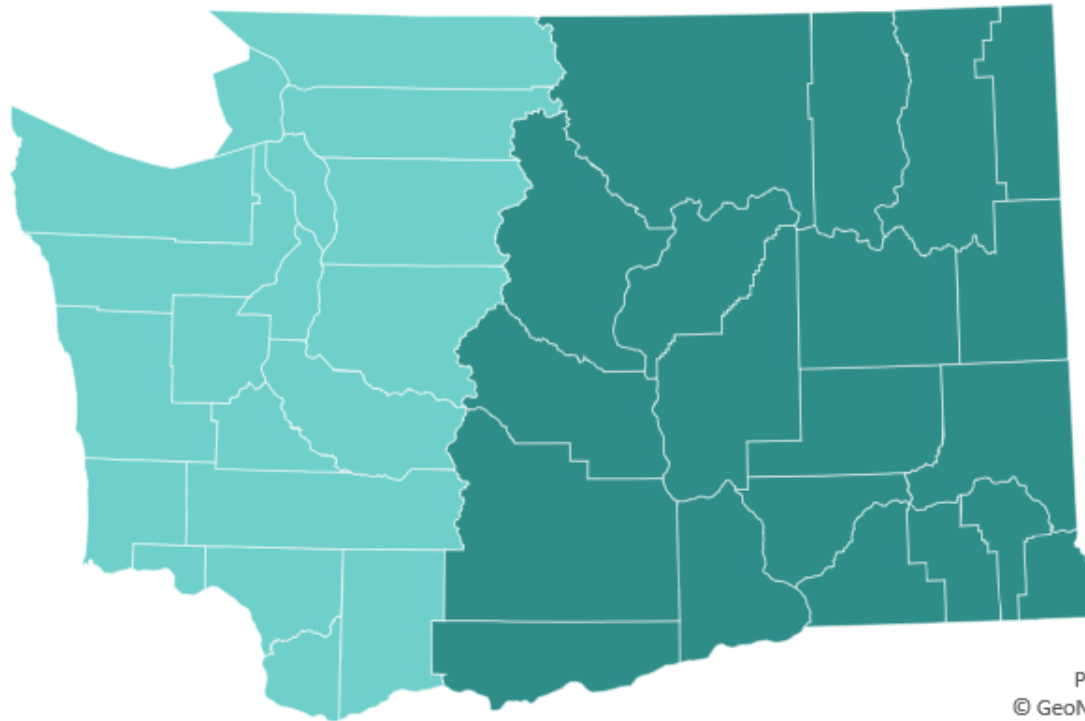
- 5 year olds saw a 3.8% decrease
- 4 & 6 year olds saw a slight increase in coverage (1.3% and 0.8%)



Fully vaccinated 4-6 year olds *by county*

- 59% of counties saw decreases in coverage $\geq 5\%$
- 55% eastern counties
- 63% western counties

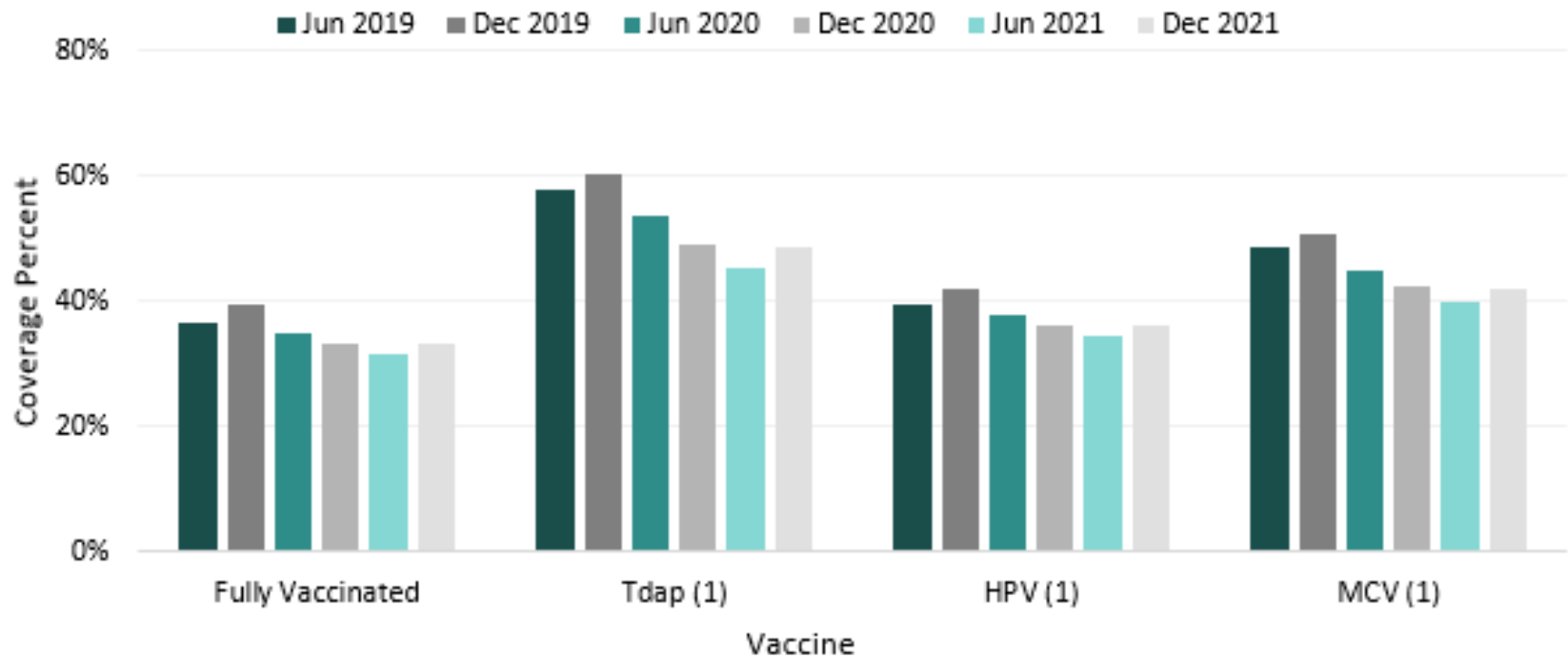
Eastern and Western Washington Counties



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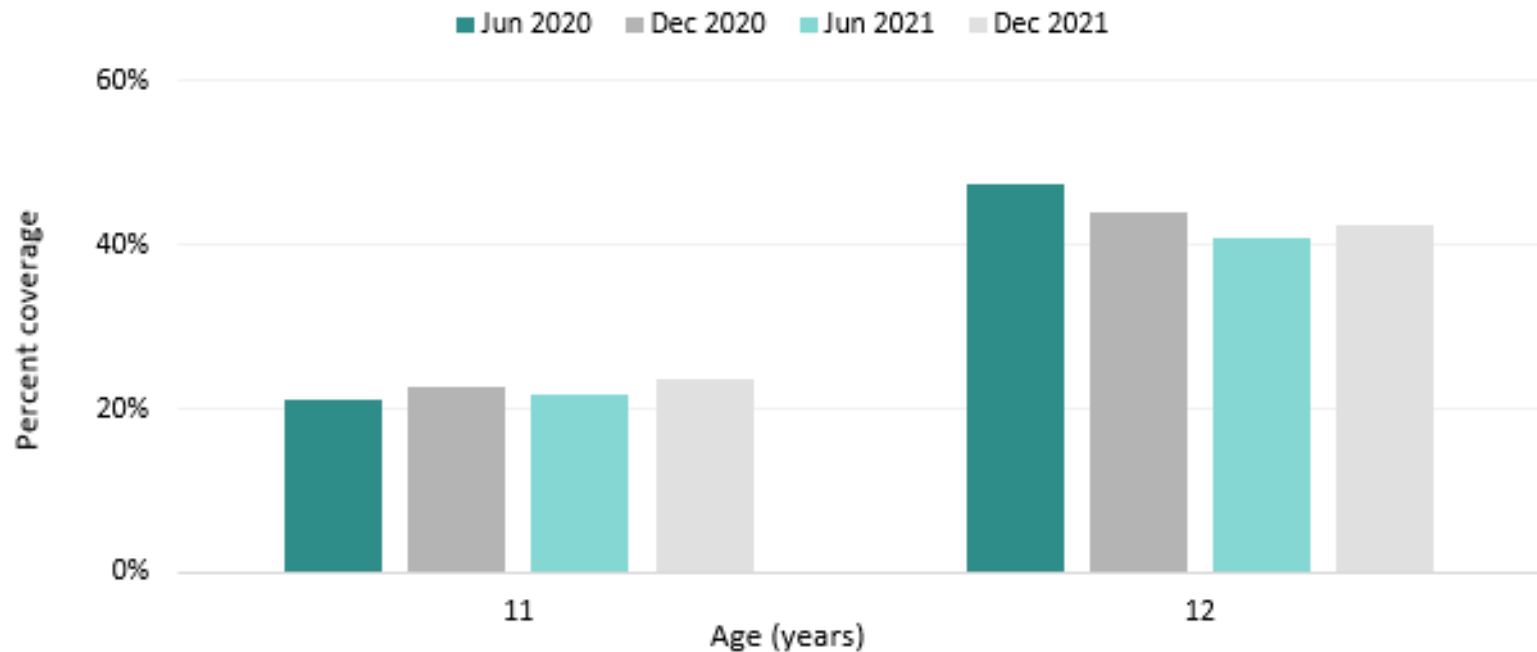
11-12 year olds *by vaccine*

- 3.6% overall decrease in coverage for the series
- Increases in December 2019 and December 2021



Fully vaccinated 11-12 year olds *by age*

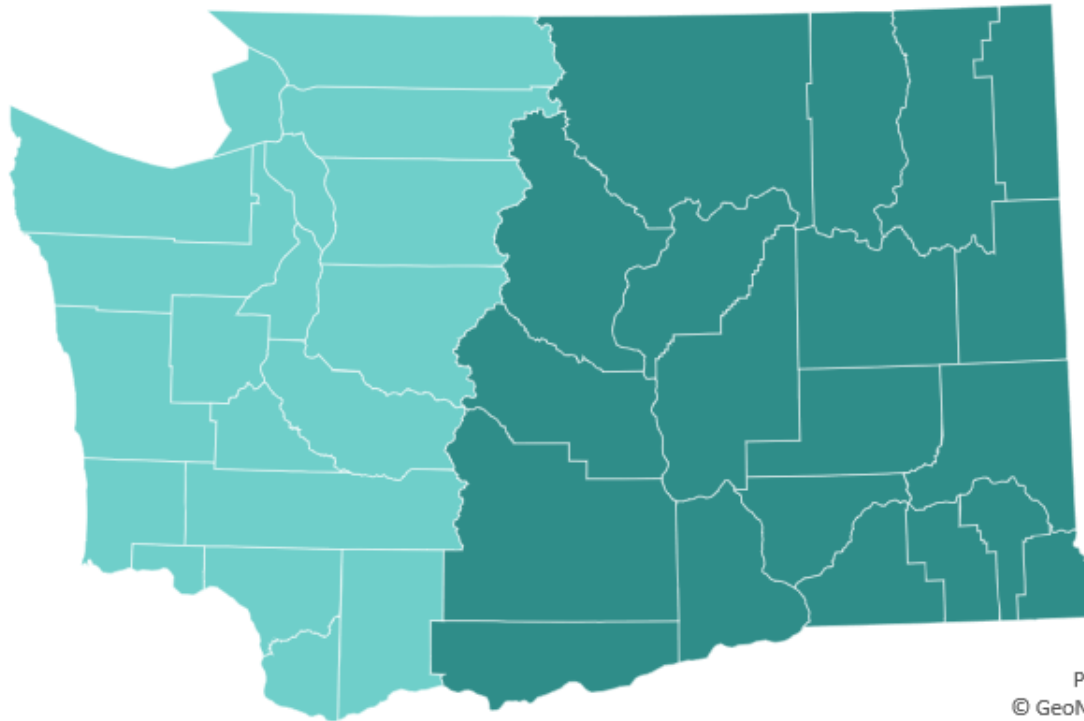
- 11 year olds saw a 2.4% increase
- 12 year olds saw a 4.8% decrease
- Both age groups saw increases in December 2021



Fully vaccinated 11-12 year olds *by county*

- 36% of counties saw decreases in coverage $\geq 5\%$
- 35% eastern counties
- 37% western counties

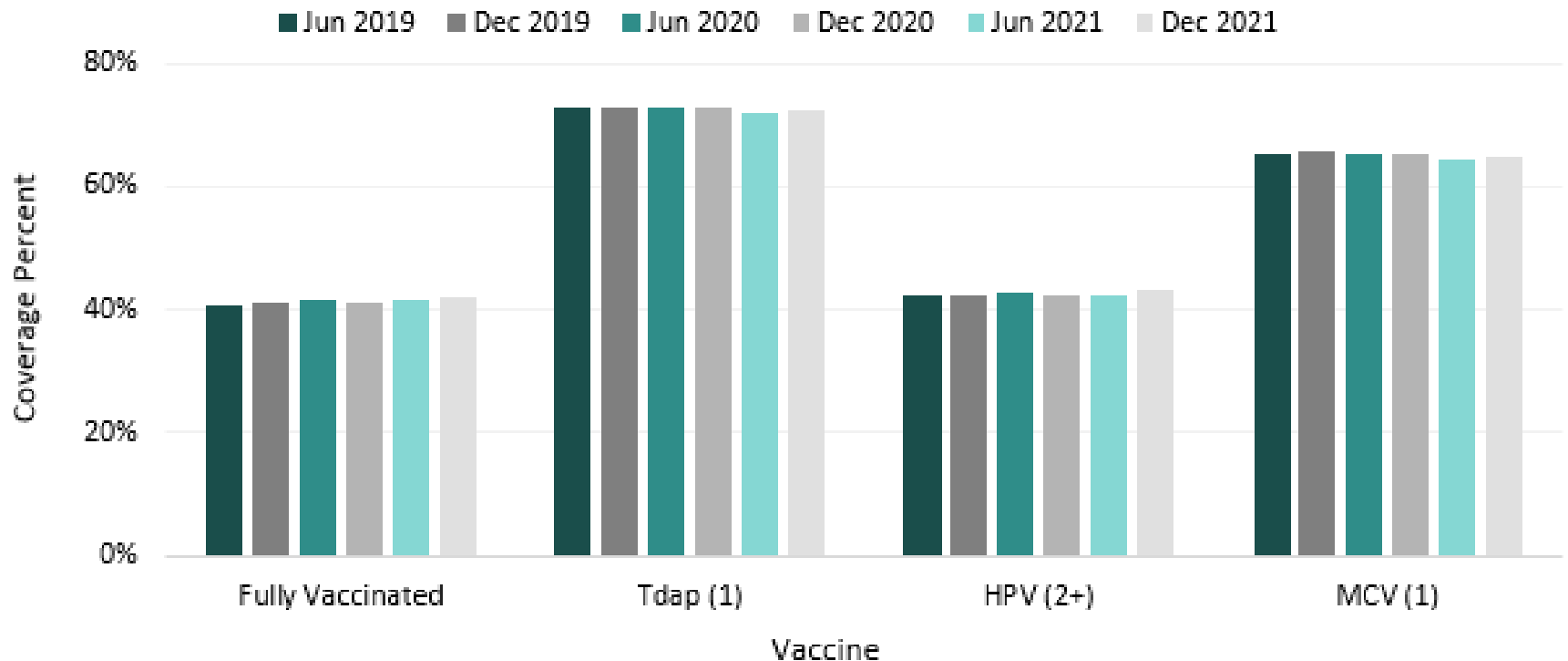
Eastern and Western Washington Counties



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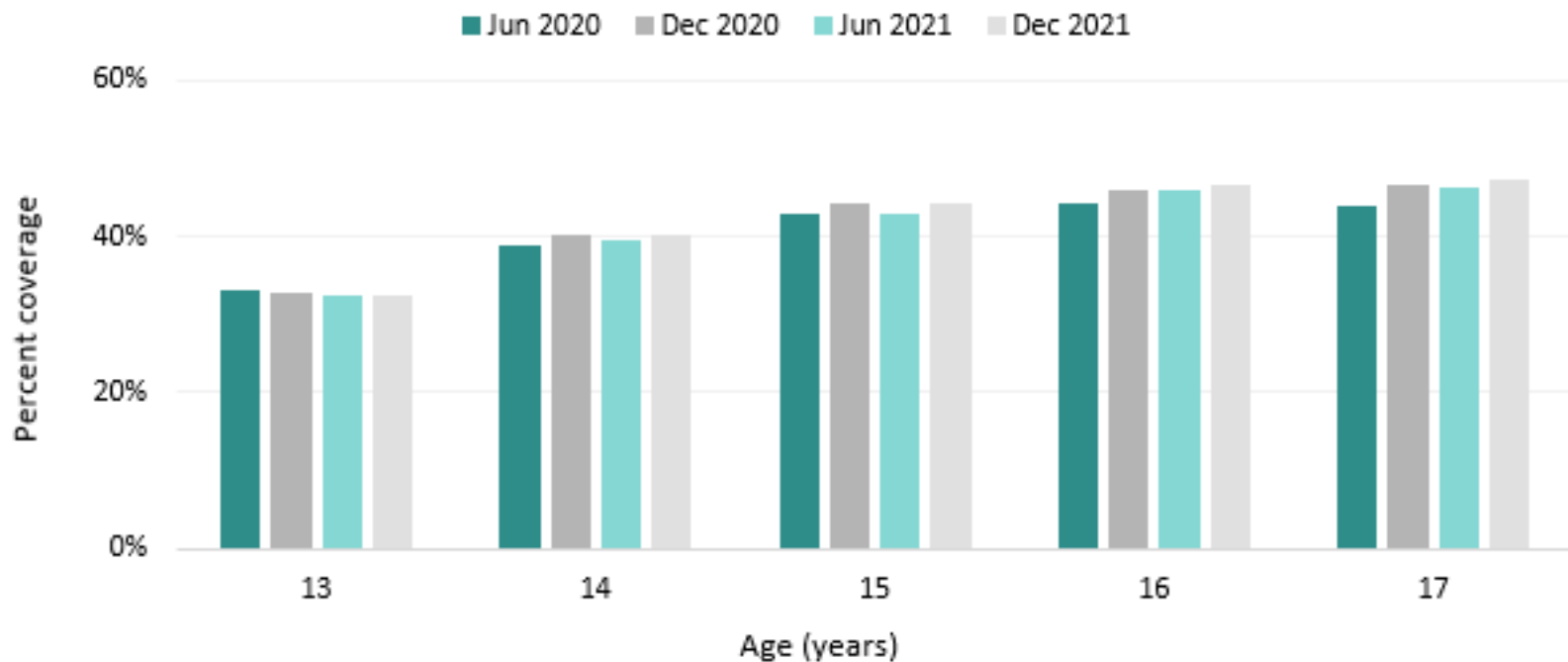
13-17 year olds *by vaccine*

- 1.3% overall increase in coverage for the series
- Tdap, HPV, and MCV rates remained relatively stable



Fully vaccinated 13-17 year olds *by age*

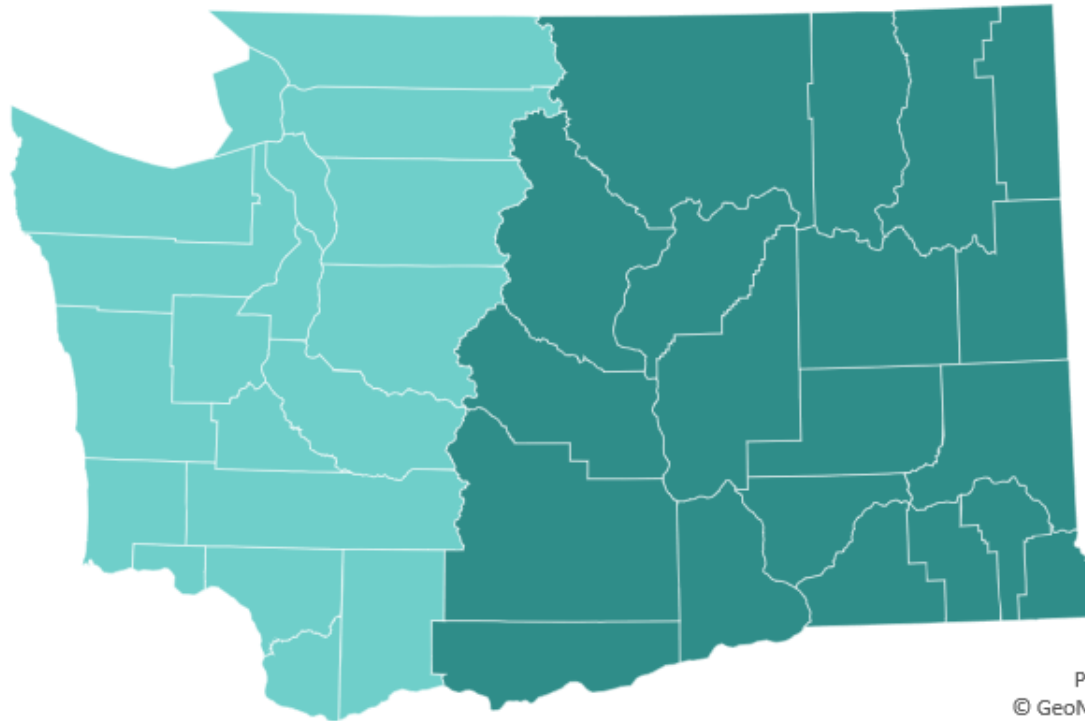
- 13 year olds saw a 0.6% decrease
- 14-17 year olds saw increases (1.4%, 1.2%, 2.3%, 3.1%)



Fully vaccinated 13-17 year olds *by county*

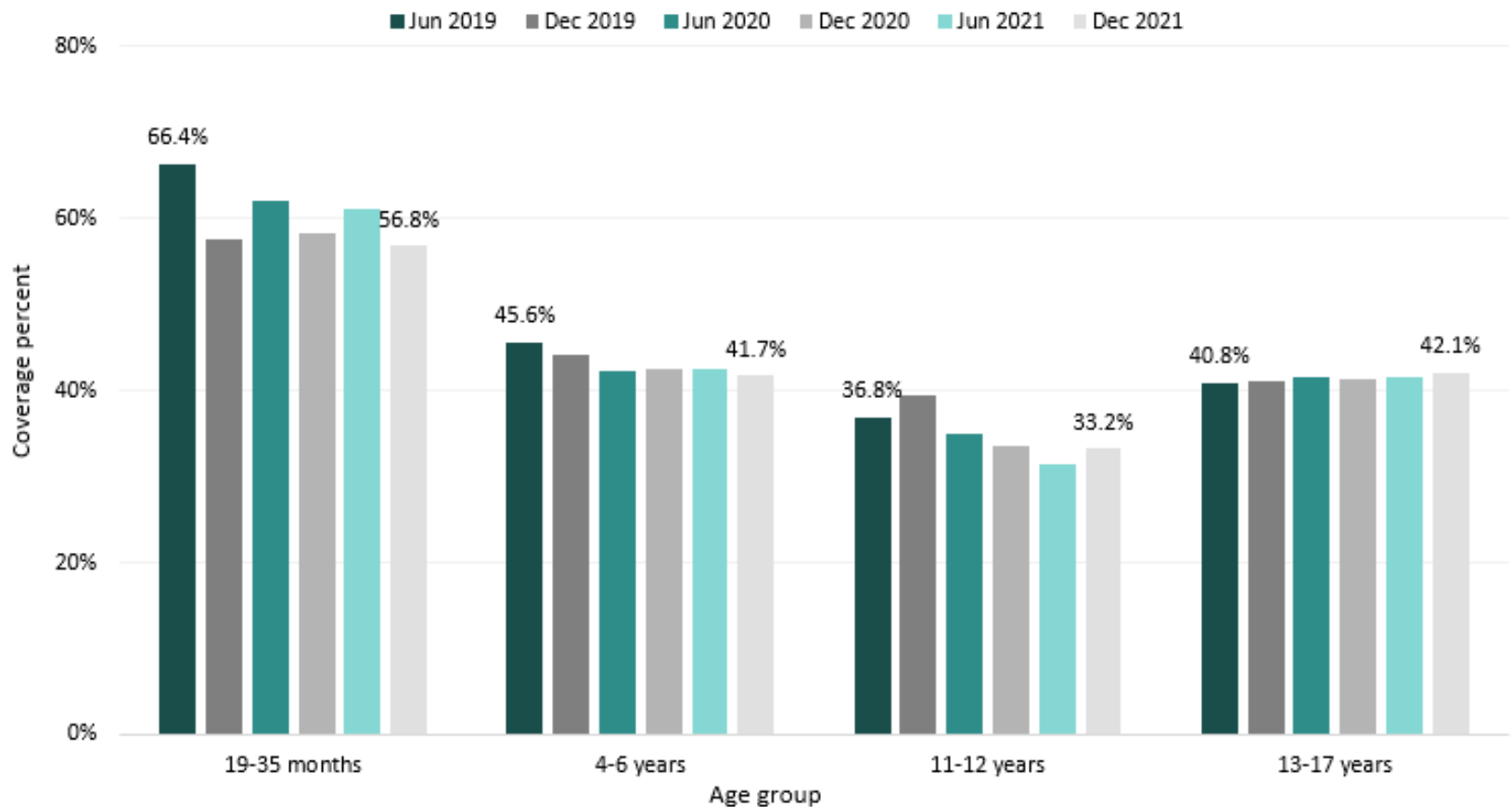
- 5% of counties saw decreases in coverage $\geq 5\%$
- 2/20 eastern counties
- 0% western counties

Eastern and Western Washington Counties



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To summarize *fully vaccinated*



Takeaways & Next Steps

- Vaccine administration remains lower
- 19-35m, 4-6y, and 11-12y coverage remains lower
- Public health efforts put towards increases:
 - Providers
 - Parents
 - Schools
 - Tribes
 - Local public health

Washington Childhood Immunization Report



The COVID-19 pandemic impacted childhood immunization rates throughout Washington state because of widespread lockdowns, school closures, and disruptions in health care delivery. The effects of delaying well child visits were examined in four age groups to help address gaps in immunization coverage and return immunization rates to pre-pandemic levels.

Statewide Immunization Administration

Since the pandemic began, fewer routine immunizations were administered to children under 18 years of age when compared to pre-pandemic levels. Although administration numbers increased when comparing 2020 to 2021, immunizations are still down 13%. Improvements in administration were seen in all age groups except in the 0-24 month olds, where doses administered in 2021 were less than those administered in 2020. The data does not include flu or COVID-19 vaccinations.

Immunizations Administered to Children Under 18

2015-2019*	2,164,117 Doses
2020	1,803,232 Doses
2021	1,880,732 Doses

*Yearly immunization administration average



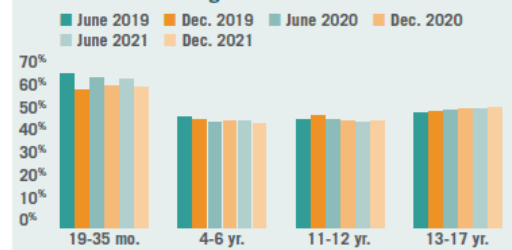
Childhood Immunization Coverage by Age

Between June 2019 and December 2021, vaccination coverage:

- Declined the 19-35 month age group by 9.6%.^{1,2}
- Declined in the 4-6 year age group by 3.9%.³
- Declined in the 11-12 year age group by 3.6%.⁴
- Increased in the 13-17 year age group by 1.8%.⁵

^{1,2,3,4,5} See footnote descriptions on back.

Vaccination Coverage June 2019 - December 2021



Questions?





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